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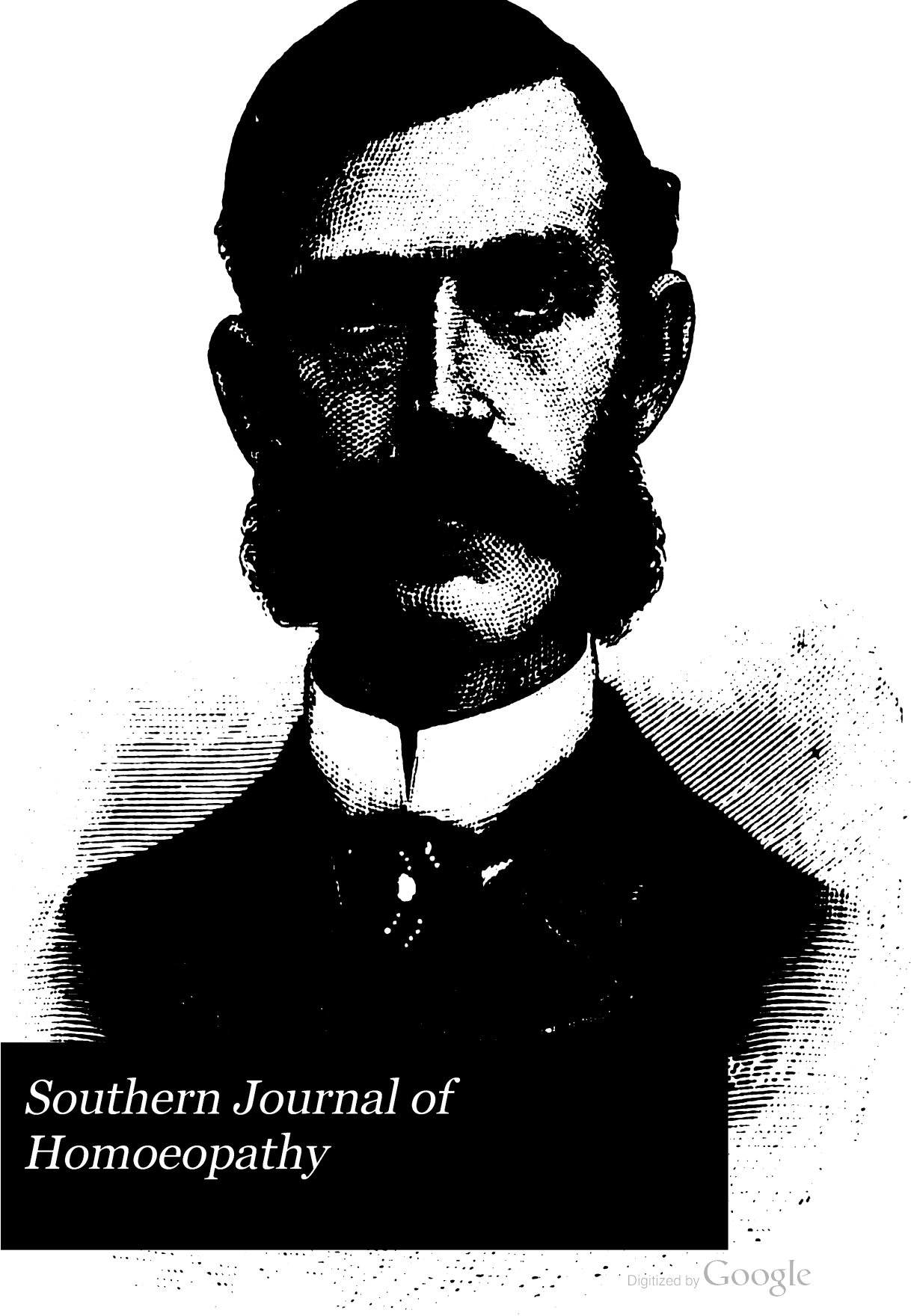
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Southern Journal of Homeopathy.

NEW SERIES,
NUMBER 1.

San Antonio, Texas, February, 1889.

OLD SERIES,
NUMBER 68.

Editorial.

The Journal Lives.

WHEN the announcement was made in the December number of this journal that it would be removed to the Pacific coast it was considered certain that such removal would occur. At a late moment, however, Dr. George G. Clifford, a sterling young physician of San Antonio, came to the rescue of Southern Homeopathy and negotiated for THE JOURNAL's return on southern soil, effecting arrangements with its retiring editor, which will enable him to continue its publication from our sister city.

It is with profound satisfaction and pleasure that this announcement is made. For nearly six years THE SOUTHERN JOURNAL has been conducted as the distinct organ of southern homeopathic interests. For about four years of that time its editor and publisher had upheld it through difficulties and trials which would have discouraged a fainter heart and his pocket book had suffered a very heavy drain in order to keep it afloat, and to feel that it would be forced to discontinue existence as a champion of the interests of homeopathy on southern soil just as it had become a remunerative

property was indeed unpleasant to contemplate. The south needs a journal to battle for the rights of similia and it would be a sad commentary on the school pride of the physicians of our section should their only periodical be allowed to remove without protest. To Dr. Clifford belongs the credit of saving the profession this humiliation, and when he put his strong young shoulder to the wheel and placed his hand on the helm of this journal he made himself deserving of the heartiest support and most grateful acknowledgements of all his southern brethren.

It is with profound sorrow that its founder retires from the management of THE JOURNAL. The labor of establishing and conducting it has been a labor of love, and only a severe impairment of health, in large part in consequence of this labor, prompts his retirement and removal from its field. During the five and a half years of its issuance he has worked with whatever of zeal and ability he possessed to advance the general interests of homeopathy in southern territory and with much satisfaction he reviews the history of THE JOURNAL and its accomplishments, and right willing is he to leave it to his brethren to estimate the value of its efforts in their behalf.

Naturally enough the course of THE JOURNAL has not pleased everybody, nor

has its editorial pen been guided always in superior wisdom. It has hewn to the line and has doubtless cut to the quick at times, but in retiring from the tripod it can be said in sincerity and candor that naught has been set down in malace, nor in leaving it does its editor carry with him a scintilla of ill will toward any professional brother whose course he may have thought proper to criticize. Looking always to the advancement of the interests of homeopathy in the south rather than to the favor of friends or the punishment of enemies he does not feel that at any time in its history has *THE JOURNAL* been prostituted to personal ends, and he retires from it with the honest conviction that its record is generally satisfactory to the profession to whose wants it has sought to administer.

To the many friends who have contributed to *THE JOURNAL*'s pages and to its financial support in the years of his editorial management, and to his journalistic brethren who have been so fraternal and courteous with him, the retiring editor desires to make especial acknowledgement and in doing so to assure them of his sincere regret at the necessary severance of the very cordial relations which have existed so long. To him journalism is a delight despite its labors and disappointments and within a year, if his life is spared and his health restored, he hopes again to mount the tripod and battle for homeopathy and her cause on the golden shores of the Pacific, where the resumption of those relations will be exceedingly gratifying to him.

A WORD FOR THE NEW EDITOR.

Dr. Clifford is a young man—a coming young man. Almost at the very outset of his professional career he has shown himself to be a brave and devoted disciple of Hahnemann, one who is confident of the eventful full recognition of

homeopathy in the south, by bareing his breast to the work of conducting this journal, and he is deserving of the earnest and cordial support of every physician of the new school, north and south, who would see our system of practice openly recognized and substantially prosperous in the southern portion of our common country. An editor cannot conduct a journal alone, he must have a cordial, moral, a free and hearty intellectual, and a solid financial support from the profession. These given and there is no fear of the complete success of *THE SOUTHERN JOURNAL OF HOMEOPATHY* under the management of its new editor. Hold up his hands, brethren, his work is in your behalf. It is your work, and as it is successful so will the general interests of homeopathy in southern territory be advanced. As you have strengthened and cheered its retiring editor in his labor of love, so strengthen and cheer the new editor in his voluntary assumption of the work. Not only so, but ten-fold more freely and cordially than you have supported his predecessor support him, for in so doing you will strengthen and upbuild a cause in which you are equally interested with himself. Make *THE JOURNAL* your journal and through it labor for the general upbuilding of the cause of homeopathy in the section it represents, thus gladdening the heart of its editor, improving and strengthening yourselves, and adding to the glory which belongeth to similia.

C. E. FISHER.

To the Profession.

It was with surprise and regret that I read in the December number of the *JOURNAL* Dr. Fisher's farewell editorial. It is true that I knew for some time before that he contemplated leaving Texas but did not dream that the *JOURNAL* was

dependent on the leaving or staying of Dr. Fisher or any other one man. I thought so great a necessity as a southern homeopathic journal, the only one south of Mason and Dixon's line, could not by the profession, or for that matter by the people, be dispensed with at any hazard or cost. I thought this section of the country and its peculiar diversity of interest was too great to be left without a representative, for the spreading and making known its truths and virtues. I thought surely some one will take up the gauntlet and couch the lance in the tourney of our faith. In fact I could not see how it could be otherwise, until Dr. Fisher came to bid me good bye, and among other matters the subject of the JOURNAL was brought up. It was then, and not till then, that I fully realized the situation, and then and there determined that young as I am, both in years and in the profession, that if the older and better qualified would not buckle down to the work that I would put in my money and labor and do the very best I could toward keeping up our common cause in the south; not for a moment doubting but that I would not only retain all that Dr. Fisher has gained, but that the fast increasing population of our section would add to the disciples of the true doctrine of Hahnemann.

And now, brethren and laymen, having entered into the work with my whole soul and strength, I will make it an assured success with your help. I expect in this enterprise, like in any other, to encounter opposition and many disappointments, but am determined to meet them boldly and fearlessly, shrinking from nothing, whenever I think it right to take a certain stand. And if errors are made do not think them of the heart. In other words, I mean business and that strictly, feeling assured that enough of right thinking people of our faith will be found to

support so good a cause as ours. I want it distinctly understood that the JOURNAL has on no war paint against any one or against any faith, but it does not propose to be trodden on and will always defend itself and its cause to the bitter end, against the world, being always ready to uphold the faith that *in it is*.

In conclusion, brethren, let us work together, standing in one solid phalanx, shoulder to shoulder, in our one common cause, *and victory is ours.*

Dr. C. E. Fisher.

THE life of every man who has attained eminence by his inherent talent and industry is an incentive to all who read it. Men of this stamp are convincing proofs that it is by no means essential to a man's greatness that he has the assistance of "aristocratic birth, wealth and consequent position, forearm him for his encounter with the world." Those who have risen highest are not the men who have inherited most, except it is in nobility of soul and purpose. These men "make fortune and adverse circumstances alike a spur to goad their steed up the steep and stubborn mount where Fame's proud temple shines afar."

To such men everything is possible, and there is no height to which genius or talent may not tread when honest ambition spurs them onward. An acquaintance with the private biography of Dr. Fisher lets us into the secret of his success in his chosen career in life.

Charles Edmund Fisher was born in Mahoning county, Ohio, March 7th, 1853, and is consequently now nearly 36 years old. His father is of German ancestry, a thoroughly energetic man, belonging to that enthusiastic, devoted, self-denying profession, the itinerant; a Methodist preacher, whose whole life has been spent in the west.

His mother is of Scotch-Irish parentage, a woman of undaunted courage and wonderful character and endurance; a thorough helpmeet in the church-work of her husband. Removed to Kansas when five years old, in the troublous times immediately preceding the war. Received only a common school education. At fifteen he entered the University of Kansas, and pursued his studies there for one year. At sixteen he commenced the study of medicine with G. H. T. Johnson, M. D., president of the Kansas state board of health, at Atchison. During his studentship with Dr. Johnson, he also worked in a printing office, folding and delivering the Morning Champion before daylight, in all kinds of weather characteristic of northern Kansas. This position he held for three years, to get money to go to medical college. Next he attended the Cleveland Homeopathic college during the session of 1870-71, and returned to Kansas to pursue his studies with Drs. R. and F. K. Huson, of Lawrence, the most prominent homeopathic physicians of the state at that time. The following year he attended the Detroit Homeopathic college, and graduated therefrom in June, '72. From thence he returned to Kansas and located at Wichita, a wild frontier town of less than 2,000 inhabitants, where it was quite the fashion to "lay men out" with their boots on as a pastime. Before twenty years of age he was elected county physician of Sedgwick county, over eight allopathic competitors. This position he held till fall of '74, when he went to Cincinnati to take a review course in surgery, this being prompted by his love for this work, of which he did a large share while county physician of Sedgwick county. Was in the office of Drs. Holumbe and Beckwith in Cincinnati a year and graduated from Pulte college in '75.

In '73 he was elected delegate to the American institute by the Kansas state society. Removed to Texas in '75 and located in San Antonio, a stranger, without money, in broken health, in a place where homeopathy was unknown, fees low and expenses high. In '76 he published several issues of a small homeopathic newspaper, entitled *The Pellet*, which did good missionary work. Believing that a man "never becomes a man" until he has a wife, on July 23d, 1878, he married Miss Ella Bennett, of San Antonio (from this date his course upward has been continuous), and went on a bridal tour to Georgia, and was caught out of the state when Texas closed her avenues of entrance against the yellow fever epidemic. He spent that summer and fall at Marietta; volunteered and treated yellow fever at Chattanooga, taking life in his own hands for suffering humanity. Had charge of a small yellow fever hospital in Chattanooga, and was highly complimented for faithful services by the board of health and the citizens relief committee.

Returned to Texas, located in Corsicana and soon entered into a sweeping practice. Spent the winter of '81 in New York at one of the large hospitals. His wife's health becoming seriously impaired, he removed to Austin, Tex., in the summer of '83, and established the *Texas Homeopathic Pellet*—predecessor of *THE JOURNAL*—in August, '83, changing its name to *THE SOUTHERN JOURNAL OF HOMEOPATHY* in August, '85.

In May, '84, he organized the Texas Homeopathic Medical association and was its first president. During the same year he bearded the lions in their den, single-handed and alone, before the state legislature, when our allopathic brethren introduced their famous medical bill, and so signally defeated it that it only got four votes in its favor. Largely instru-

mental in organizing the Southern Homeopathic Medical association at New Orleans in April, '83, he was elected first president of that body, since which time he has been regularly elected to full professorship in two colleges and tendered a professorship in one other, but has declined them all to continue *THE SOUTHERN JOURNAL*.

He has been and was up to the time of his departure a prominent member of the board of trade in Austin and acknowledged leader of its board of Aldermen, of which he was for six years a member.

Dr. Fisher leaves Texas because of impaired health from over work in the cause of homeopathy and a large practice. He goes to New York and Europe for hospital review in surgery and gynecology, thence to California to reside. He has a happy family, consisting of wife and three bright little cherubs.

Much is due Dr. Fisher from the profession at large for his earnest endeavors to keep the banner of homeopathy aloft and spreading its principles. This has been done through the *JOURNAL*, which has required a great deal of hard work, arduous and exacting duties. The support of the *JOURNAL* was meagre and for three years he kept it alive from his own pocket.

He is a representative American citizen who has won success by working for it. He has been highly honored and has deserved every honor he has received.

May his future success in life be as fruitful of good results as his past has been of hard work and privations.

Dr. Joseph Jones, of this city, promises the readers of the *JOURNAL* a continuous series of articles upon anti-vaccination. We invite a close perusal of them as the doctor has had wide experience in this line and something good can be expected.

Practice.

Contributed to *THE JOURNAL*, by S. Lillienthal, M. D.

The Cheyne-Stokes' Symptom, or Respiratio Interrupta, Apnoea.

A Study, by Dr. J. Kafka, of Prague.

WE all know that this symptom consists in an interruption of the normal rhythm of breathing, an apnoea or momentary stoppage of breathing, till gradually, after a deep inspiration, normal breathing returns. At the beginning of the apnoea the intervals are still short but steadily increasing till in severe cases it may last 80-120 seconds, and after a deep inspiration, normal breathing returns. Such an apnoea is nearly always accompanied by deep sopor, in children as well as in adults. Different theories are given, but Filchne produced it artificially in rabbits by narcotizing them with morphine, and this reminds me of a case which I observed fifty years ago. Two children suffered from severe whooping cough; the attending physician blistered their chest, removed then the epidermis and sprinkled morphine over the wound. Deep sopor soon set in with this characteristic apnoea, and it took steady treatment, with strong black coffee, etc., to remove the sopor and to restore breathing.

This Cheyne-Stokes' breathing is often observed (1) during inflammation of the brain, medulla oblongata and their membranes; when firm, purulent or serous exudations form, which exercise severe pressure on the basis of the brain. The more intensive this pressure, the more severe the manifestations, more or less increasing apathy and sopor, stiff neck, abdomen drawn in with obstinate constipation, dilatation of pupils, Cheyne-Stokes breathing, sometimes also convulsions, trismus or tetanus or paralysis,

retarded or intermitting pulse, skin pale, etc.; (2) in tumors of the brain and in cerebral tuberculosis; (3) in serous effusions in the ventricles or at the basis of the brain; (4) in diseases of the respiratory organs, e. g., bronchitis, pleuritis, croup, emphysema, when respiration becomes shorter and more superficial in consequence of the inhibition of air, whereby the blood becomes overloaded with carbonic acid and carbonaemia is produced. In all such cases the beginning drowsiness is the first symptom hinting to carbonization of the blood, though consciousness is still preserved and the patients reply when addressed. With the increasing dyspnoea lips and nails become cyanotic, expectoration is fluid and foamy, low mucous râles are heard, hinting to a beginning œdema pulmonum, the pulse becomes frequent and weak and breathing constantly shorter. With increasing sopor total unconsciousness ensues and with it the Cheyne-Stokes' phenomenon, collapse, temperature sinks, deglutition becomes impossible and paralysis pulmonum sets in. (5) Cheyne-Stokes' respiration is also observed in the course of several diseases of the insulatory organs, as in endo-peri and endocarditis, in valvular affections and stenosis, in fatty heart and in aneurysm aorta, also in the atheroma of the coronary arteries, when the impulse of the heart and the sound of the heart become weaker, the systolic murmurs stronger, and, in consequence thereof, the inspirations weaker and flatter, when dizziness, fainting and coma are added, with deep sopor and apnoea. Death follows from anemia of the brain.

Apnoea has also been observed in the course of acute infectious diseases, as scarlatina, measles, variola, typhoid fever, etc., when appearing with grave symptoms of the brain, bronchial or complicated with cardiac affections. In pyæmia,

septicæmia, in uræmia and carbonæmia, though there may be deep sopor, I never observed this Cheyne-Stokes' apnoea.

This apnoea is always only an accompanying symptom in certain alienations of the brain, arising either from pressure on the brain, or from anæmia of the brain. Prognosis is usually more than doubtful. In all such cases deep sopor prevails, and it is of importance to know whether we can give our remedies per os, for sometimes the mouth is tightly closed by trismus, or consciousness is so far abolished that deglutition is abolished and fluids introduced then in the mouth may produce suffocation, and it is then advisable to give the remedy per nares, by injections per anum or hypodermically. To nourish the patient clysmata of beef-tea, of milk or yolks of eggs dissolved in tepid water may tide the patient over till improvement sets in, as it did several times in cerebral affections. Artificial respiration ought to be never neglected. In children compression of the thorax at the mamillar line, with both hands on the sides of the ribs off and on, till the breathing sets in again with a deep inspiration. In grown persons, especially in senile ones, it is preferable to compress the abdomen and then ease off again in order to work on the diaphragm and thus cause expansion and relaxation of the thorax. Put the flat head on the epigastrium and press heavily on the stomach and false ribs and then release the pressure alternately till respiration is re-established. Though many cases get over it anyhow, it is advisable to do something, as the family is horror-stricken and beg the physician to do something to relieve the suspense.

In consequence of a ripe experience, gained in a practice of over fifty years, I feel convinced that exudative processes in the brain, meninger or ventricles, as well as in the pleura and pericardium,

will even succeed in the most desperate cases, provided the right homeopathic remedy is shown, though deglutition may be impossible, by giving the drug hypodermically or by olfaction. In superficial abscesses of the brain, in large pleuritic, purulent or serous exudations, even in croup, surgery is often strictly indicated. In relation to homeopathic treatment, we must study whether there are present symptoms of cerebral pressure and its consequences, or carbonæmia or anæmia of the brain, with weak action of the heart, and the remedy selected accordingly. Hypodermic injections with homeopathic remedies I have used for the last five and twenty years, and with great success. I fill a Rooez syringe about a quarter full with distilled water and add one drop of the indicated remedy, as opium, belladonna, or atropinum, or lachesis, or hellaborus, etc., not below the third decimal dilution, and I prefer even the higher dilution, and inject it in any soft part of the skin, as the neck, forearm, ribs. I prefer using a perfectly aseptic golden needle, as steel gets rusty and rough. Its place of entrance must be kept covered with the index finger till no fluid flows out. Two or three injections in twenty-four hours suffice to show whether their action is beneficent. If it fails, let us try another remedy in the same manner, but be sure that the needle is perfectly clean, and inject at another spot.

Application per nares I am in the habit to perform thus: The tips of the fingers must be cleansed with soap and again with clean water. I moisten then the tips of the index and middle finger and thumb with the indicated remedy, rub it well in and then hold the fingers before the nostril during respiration. Though the patient may be unconscious, his eyes and forehead evince the action of the spirituous remedy on the nasal nerves as

well as on the cerebral nerves and thus its action on the whole brain.

Allow me to report a very interesting case: January 14th, 1879, I was called into the country and found a strong, hearty babe of four months suffering from a severe cough and dyspnoea, after being out during a cold and windy forenoon in the fresh air. The child had a high fever, the head burning hot, the cheeks red and hot, lips and nails already bluish, his features full of anguish, breathing very rapid, superficial, with the epigastrium drawn in, cough dry, unceasing, crying often, voice yet clear, not hoarse, unable to nurse though thirsty; percussion everywhere sonorous; on both sides of the chest coarse and fine râles; more on the back than in front without consonance; heart beats strongly, pulse cannot be counted, rather contracted; body feels everywhere very hot. Against this capillary bronchitis *Aconite* 3x in water, teaspoonful every half hour. After midnight fever lessened, but continuous cough prevented nursing.

January 15th. Less fever, cough looser, breathing the same, blueness of lips and nails. *Ipec. 3d.* Toward evening the child became comatose and when, during the intervals of coughing, awakened to nurse, he swallowed small mouthfuls and then fell asleep again.

January 16th. Temperature 38, cough less, no rattling, no livor, but sopor increasing, deglutition impossible, eyes closed, pupils not dilated, no spasms; hence exquisite carbonæmia and nutrition per *annui* necessary, a very small quantity of breast milk off and on. *Ammon. carb. 2d*, 20 drops in half a glass of water, a tablespoonful alternately injected every hour. Toward evening the first attack of apnoea. Artificial respiration restored breathing after fifteen anxious seconds. *Opium* in the same manner per *annui* instead of the ammon. carb.

January 17. My son, who watched with the child during the night, reported six attacks during the night and that the stoppage of breathing lasted sometimes thirty seconds; deep sopor, deglutition impossible. Opium and ammon. carb. injected alternately and breast milk per annus continued.

January 18th. During the night stoppage of breathing for eighty seconds, when features became collapsed and livor returned. Heart and pulse could be felt beating, fontanelle sinks in. I tried now my two remedies *by olfaction*. After a few inhalations of opium 6th dil., the eyelids reddened, the forehead wrinkled, and after ten minutes I tried ammon. carb. 6th in the same manner. After the third application I saw the child sleeping sweetly for an hour, and when it awoke it was able to nurse and did it vigorously for a quarter of an hour, and then slept again. Both remedies were continued in *hourly alternation*, and January 22d I could consider the child saved. If olfaction would have failed, hypodermic injections would have been in order.

Opium is certainly *the* remedy for severe ammonia-armia. In cerebral affections we would find more indications for belladonna or atropinum, kali, iodatum, or lachesis; in cerebral anarmia during the course of cardiac diseases, ether, phosphorus and arsenicum are indicated. Ammon. carb. is only an *adjavans* to revive the suppressed activity of the brain.

Billig and Lorbacker related cases which yielded beautifully to the action of opium. Gilbert, jun., mentions that the mucous membrane of the cheeks, on account of their great vascularity, offers still another mode to give our remedies in such desperate cases, by moistening them frequently with the water holding our remedy in suspense. Whether stannum might do something in such cases is doubtful.—*Allg. Hom. Zeitung*, 18-21, '88.

The World Moves.

MERCURIC CHLORIDE IN DIARRHŒA.

It is seldom that an allopathic practitioner acknowledges indebtedness to the homeopathic school, but this is what Dr. Millard, of Edingburgh, does in a letter to the British Medical Journal regarding the use of mercuric chlorides in diarrhœa, to which we have previously referred. He writes: I did not obtain information of the use of hydrarg. per chlor. in this form of diarrhœa from Dr. Ringer's excellent work, as Dr. Macdonald supposed, but probably from the same source that Dr. Ringer obtained his, of which to any one who knows the book bears many traces, namely the homeopathic treatises.—*Scientific American*.

Sam Jones on "Faith Cure" and "Christian Science."

"I'll tell you where this 'faith cure' comes in. There's an old brother and a sister who have been taking all the nasty, quack patent medicines on the market for the last ten years. Somebody comes along and prays over 'em, and they quit using the patent medicines, and they are well again. They say it was faith that cured. It was faith. It was faith which caused them to quit taking old patent nostrums, which cured them.

"I don't say I belong to the 'Christian science' crowd, or anything of that sort, but I thank God that by the side of my sick wife I may kneel down and pray that the remedies given by the physician may prove effective. I don't pray over the supernatural; I pray over the pill."

How the Similimum Acts.

By giving a drug under certain conditions, certain effects are produced. When you have these effects and prescribe the drug under the similimum you get the opposite effects.

Surgery.

Excision of the Mammary Gland for Sarcomatous Neoplasms.

W. E. Green, M. D., Little Rock, Ark.

DURING the past seven years I have had under my professional observation nine cases of mammary tumors, as follows: Two fibromata, four sarcomata and three carcinomata. The fibromata were all small, and gave no inconvenience, save mental apprehension, therefore, all surgical offers of relief were rejected. The carcinomata, one atrophying scirrhus, one disseminated and one medullary were all so far advanced that I deemed radical measures inappropriate. Of the sarcomata, three were operated upon, and one, the largest mammary tumor that I ever saw, left me upon the mere mention of surgical treatment.

Before giving a history of these cases, the following tabulated summary may not be irrelevant:

Sarcoma of the breast belongs to that division of neoplasms, that represents embryonic or transitional connective tissue growths. It is the result of some nutritive disturbance, and originates through a proliferation of pre-existing cells of the stroma, increases by progressive cells multiplication, the textural modifications being the same, primarily, as those seen in ordinary granulation tissue. It infects and destroys adjacent structure by infiltration, invades other organs by extension through the blood-vessels and lymphatics, and is subject to various metamorphoses and degenerations. It is the most vascular, as well as the most bulky of the neoplasms. It is usually solitary, and is endowed with a persistent tendency to increase. It occurs most frequently during the time of

mammary perfection, between the ages of 16 to 40, and at this period stands second in degree of frequency, constituting forty-seven per cent. of the non-carcinomatous growths. It is not influenced by hereditary predispositions, and its origin is rarely traceable to injury. It is usually more rapid in its development than the other forms of connective tissue neoplasms; but its progress is at times varied, and it may remain stationary for years. Continuous enlargement indicates solidity, while sudden or rapid increase indicates cystic accumulations. As a rule it is attended with pain; is free from attachments; the skin retains its normal color; the veins do not enlarge; the nipple remains normal and the lymphatic glands are free from tenderness or enlargement. It is excessively malignant and is more liable to systemic complications than carcinoma but a local recurrence is less frequent than it is in that disease.

There are several varieties of sarcoma, as the giant celled, the round celled and the spindle celled; these are determined by the prevailing form of the cell. Subdivisions are designated by the character of the intercellular substance. The spindle celled is the most common, but the round celled is the most pernicious. Small and slow growths are less liable to return than rapidly increasing ones, and the liability to metastasis is in proportion to the speed of development, and also increases with the advance in the age of the patient. There is but little to be expected, in a curative way, from either general or local treatment, in the management of any of the varieties of mammary neoplasms.

Since my surgical experience, in tumors of the breast, has been limited to sarcomata, I cannot speak from a practical knowledge of the other forms, but from a careful study of the latest litera-

ture on the subject I make the following deductions:

Primarily a local degeneration of the mamma has a tendency to first invade the surface, before it affects deeper structures. All growths, though small and stationary, may at any time change their nature and pass into a carcinoma, a sarcoma or a myxoma. All encapsuled, or now carcinomatous, developments in the early stages possess so many features in common that a differentiation is impossible. Therefore, all small tumors should be removed by enucleation, and every one that is increasing in size should be operated upon at once. If any suspicion of malignancy exists the entire gland should go.

Carcinomata are not encapsuled, they invade the skin and all adjacent tissue, therefore operations for this class of neoplasms, or for connective tissue growths that have extended beyond the limit of their capsules, should be performed in the most thorough manner. An incision encircling the entire base of the organ should be carried down, through all the superficial structure, to the muscles of the chest, and the included mass dissected away, then all nodules, particles of fat, and the pectoral fascia removed, after which the wound should be extended to the axilla, and this region thoroughly explored, and divested of its glandular and adipose structure. In fact the more vigilant and bold the operation the greater is the security to the patient. The case should be kept under surveillance for several years, so that any tendency to recurrence may be discovered and removed early, for by this course suffering may be averted, years added to lives and many lives saved.

The three following cases constitute the sum-total of my surgical experience with mammary tumors:

Case 1—Mrs. K., aet 42, consulted me March 15, 1879, on account of an irregular shaped nodular, elastic and painful enlargement, situated above and to the outer side of the nipple of the left breast. It was the size of a hen's egg, and had developed within the past six months. I diagnosed a malignant growth, and recommended immediate removal. The advice was rejected, so she was put upon medical treatment. The remedies were carefully selected and given continuously for a reasonable length of time. No improvement followed this course, embrocations of mercury and iodide of ammonia were used, these failing to produce any beneficial effect interstitial injections of acetic acid and ergot were resorted to, and later the galvano puncture, but all to no purpose. The tumor continued to grow and at the expiration of six months had attained the size of a small cocoanut, had ulcerated through the skin and was exceedingly painful. The patient was mentally and physically a wreck, was unable to go about, and was really in a pitiful condition. She now begged for relief from the knife. I operated at once. The entire gland was removed by the usual elliptical incision, and the edges of the wound nicely coaptated, and sustained by sutures and adhesive strips. Healing principally by first intention followed, and the patient was up and out in a remarkably short time. She rapidly regained her strength, and enjoyed unusual health for nine months, at the end of this time a second tumor appeared at the outer angle of the cicatrix. This slowly enlarged and within six months was the size of a small orange. Its presence, like the former one, created a depression of spirits that soon sent her to bed. She was once more placed upon the table and the morbid mass excised. The incision was extended into the axilla and a large secondary tumor removed. In the efforts

to extract it a vein was accidentally ruptured, and the blood gushed in torrents, that nearly exsanguinated the patient in moment. Sponges were quickly passed into the wound and the life current stayed just as the vital spark was flickering. She never rallied from the shock so as to appear like her natural self again. She died in eight months, from a secondary infection of the lungs. Upon a microscopical examination the growth proved to be a spindle celled sarcoma.

Case 2—Mrs. E., mulatto, aet. 28, came to me for a painful swelling of the left breast. Upon examination I found a small, movable, slightly sensitive tumor, the size of a walnut, situated just below the nipple. I pronounced it a malignant growth, and advised excision for its relief, which was not favorably considered.

In March I was again consulted, when I found the tumor and the entire gland much enlarged and painful. An operation was now consented to, which was performed by an incision, that included the entire base of the breast, and was then extended to the axilla, as described on a preceding page. Many of the lymphatic glands in this region were found to be slightly enlarged, these and the adipose tissue were removed in the most thorough manner. When complete the wound was the most formidable that I ever saw, the subject being very fleshy, and presented a ghastly appearance. The borders could not be coapted by the sutures, therefore a large open space, as wide as the hand, and fully eight inches long, remained. Granulations and cicatricial shrinking, however, soon filled the chasm. A microscopical examination proved it to be a round celled sarcoma. She never improved from the operation, but died within six months.

Case 3—Mrs. S., aet. 36, consulted me March 4, 1884, for a nodular induration,

in the lower segment of the right breast. The skin had ulcerated and an unhealthy looking mass of granulations protruded from the opening. I diagnosed a malignant tumor, sarcoma, and recommended immediate removal, which was at once consented to. The operation was performed the next day, in the same manner as in the preceeding case. The same care being exercised in cleaning the wound and the axilla of every particle of tissue that had a suspicion of continuation. After the sutures were applied a large open wound remained to be filled by granulations. The specimen was lost before a microscopical examination was made, but I have no doubt as to the correctness of the diagnosis. The patient made a most satisfactory recovery and has since remained well, now almost three years.

In summing up the results of these cases we are led to the following conclusion:

Case 1—Suffering was greatly alleviated, good health was restored for a year and life prolonged for at least eighteen months.

The operation as performed, after the usual method, was imperfectly done, consequently there remained points of infection in the skin, periglandular fat, and in the axillary region, which was not explored. These developed secondary growths, that required formidable operations for their removal, and were undoubtedly the source of systemic infection. Had a thorough and early removal of the organ been affected in the first instance, and the axilla explored and divested of all its lymphatic constituents, complete recovery might have followed.

Case 2—There were no perceptible results followed the surgical interference. The operation was done in the most complete and painstaking manner, conse-

quently there were no recurrent growths, at the seat of the cicatrix, and no secondary development in the axilla. The constitutional infection probably took place before the excision was performed. Had the patient submitted to an early removal of the gland much suffering would have been prevented, life prolonged and it may have been saved.

Case 3—There was complete restoration to health, the operation was performed at the earliest moment after it came under observation, and was thorough in all the details, as a result no secondary developments.

Since writing the above I have operated twice more, but in one case sufficient time has not elapsed to insure permanency of results and the other has not been under my immediate observation, therefore I do not know how it has progressed.

Eye and Ear.

Refractive Lesions of the Eye.

G. C. McDermott, M. D.

IN presenting a paper to this journal I have chosen as my subject the *Errors of Refraction*. It will explain some of the causes in many persons not being able to use their eyes for continuous near work, as reading, writing, sewing, etc., as also other symptoms and conditions dependent upon the same cause.

It will be prudent, therefore, to define what is meant by refraction and accommodation.

Wells' definition is admirable and I may be permitted, I trust, to quote from his excellent treatise on the Eye: "Refraction is the passive power which every eye possesses, when in a state of rest--i. e., adjusted for its far point of focusing certain rays on the retina, without any effort

or participation of the muscular apparatus of the accommodation." This power of refraction is due to the form of the eye, and to its different refracting media.

"By the term accommodation is meant the power which every normal eye possesses of adjusting itself almost imperceptibly and unconsciously for different distances." At one time looking at something but a few inches from the eye, at the next moment regarding some far distant object, or taking in at a glance the vast expanse of miles of scenery."

As anomalies of refraction we will mention the two conditions known as hypermetropia and myopia.

But the state of the refraction may vary in the different meridians of the eye; thus, it may be normal, or, as is termed emmetropic, in the vertical meridian, but myopic or hypermetropic in the horizontal, or *vice versa*. This asymmetry has been designated astigmatism.

It would be beyond the province of this paper to enter into details of the conditions known as myopia, or short sight, hypermetropia, or far sight, or of astigmatism, but to state the troubles arising from them as experienced by the patient, and seen by the general practitioner.

As myopia is an acquired condition its early detection and arrest is of the utmost importance. Nearly always developed during the period of childhood and while attending school, any difficulty in seeing distinctly at a distance, or when the print must be held or advanced nearer the eyes than formerly, is a suspicious symptom and should be thoroughly investigated. Myopia being generally progressive, delay in having it treated by the properly selected concave glass and remedy is followed by a further development of the disease and greater loss of sight. The selection of glasses in myopia is of the utmost value, as an improper one, being either too weak or strong, only adds

prejudicial complications to the disease attempted to arrest.

In the higher degrees of myopia where distinct binocular vision is possible, say when print must be held at three or four degrees from the eyes, the consequent strain of the internal recti muscles produces pain and aching in the eyes and an inability to continue lengthy application, much relief can be obtained by the use of glasses, which will cause the print to be seen at a greater distance, thus removing what is termed the "near point," say to a position some "8 to 10" from the eyes.

Weakness of the internal recti muscles which so frequently attends this error of refraction, can be remedied very materially by the use of the concave glasses, which is also sometimes necessary to combine with the prismatic glass, the base of which is opposite to the muscle to be relieved.

We not unfrequently meet another class of sufferers, presenting the following symptoms, though the eyes are perfectly healthy looking.

After using them for near work, as reading, writing, sewing, for a short period, they begin to blur, burn, become red and irritable, pain and ache, and if their use be continued the greatest suffering ensues. If the work be laid aside the eyes are relieved of the above unpleasant symptoms only to be renewed on any subsequent trial of work.

This has been termed *asthenopia*, and generally depends upon hypermetropia. Thanks to Dondus, who, up to his time the real cause remained unknown, has given us a full and intelligent interpretation of it and suggested its remedy. I have seen the gravest apprehension in such cases and not a few were most dejected in spirits, anticipating early and absolute blindness.

It is in this very class of eye cases, dependent upon this error of refraction, that

glasses have aided successfully in curing the patient, and again restoring a happy mind.

Headaches not unfrequently have their cause in some refractive error, among which hypermetropia, complicated with astigmatism, take first rank.

In not a few cases have I succeeded in curing an old chronic headache by simply applying the proper glass, relieving some such anomaly. I wish to call particular attention to this one quite prevalent exciting cause of headache and would suggest, if other causes were sought and found not, the refractive condition of the patient be carefully examined and any error corrected.

It has been stated that from seventy-five to eighty-five per cent. of all cases of convergent strabismus have their explanation in hypermetropia. Squint makes its first appearance generally at an age ranging from three to seven years, when children begin to view small objects and beginning school.

If seen before the muscle has contracted permanently and the refractive trouble discovered, the selection and use of the desired lens will render an operation unnecessary and cure the patient, that is, will restore a parallelism to the visual axes.

Dullness of vision, or amblyopia, frequently depends upon the same cause.

In young children particularly where there is dullness of vision, an early examination should be made, as so much of the child's education depends upon what it sees.

Many such cases can be relieved by properly selected lenses, and in a number of cases of late, in children, quite high degrees of astigmatism were found to be the cause, when the cylindrical glass gave sharp and distinct vision, thereby enabling them to obtain an education, the grandest gift of civilization.

There are to-day, among us, many suffering from this hidden and unknown cause, the detection and correction of which would bring untold joy and blessing, and restore to the world useful members of society who are now only burdens of care and solicitous anxiety.

For the JOURNAL.

Does Vaccination Vaccinate?

Ry Joseph Jones, M. D., San Antonio.

A CHANCE remark suggests a subject. It was made by a bystander, just as I turned from the sidewalk to enter my office, viz: "The mayor is censurable for not enforcing more rigidly general vaccination in San Antonio."

It was a new suggestion of an old subject, upon which I have given much thought. As I dwelt upon the subject the following questions presented themselves to my mind:

Has vaccination benefitted the human family? Am I justified in encouraging it by the influence of my practice of vaccinating those who come to me for that service? Am I blindly, or in criminal ignorance, following a dogma, which may, during the next vaccine season, lead me into a practice which, it matters not how cautiously and carefully performed, does, as we have abundant cause to believe, injure, temporarily or permanently, the health and even destroy, ultimately, the lives of a percentage of those subjected to it, by the insertion of germs of disease into their body?

Can I, in the face of the many obtainable facts upon the evils of vaccination, continue to vaccinate innocent, helpless infants and children?

In consideration of the experience of the medical profession, at home and abroad, in hospital, general and military practice, and the voluminous statis-

tics obtainable, we may ask, does vaccination furnish any protection against smallpox?

Dr. Winterburn, in his excellent book on Vaccination, page 69, presents a table of deaths from smallpox in London and New York City, for the period of seven years, from 1804 to 1810, inclusive. In New York, no vaccination; in London it was the fashion. The average deaths per one hundred thousand in New York, sixty-three; in London, one hundred and eleven, showing a difference in favor of no vaccination of forty-eight per one hundred thousand.

On same page we find: "The London Medical Observer, Vol. VI, in 1810 published the particulars of 535 cases of persons having had smallpox after vaccination, the operation in some instances having been performed by Jenner himself, including their names, with an index pointing to the authorities as witnesses. Also, similar details of ninety-seven fatal cases of smallpox after vaccination, and of 150 cases of injury arising from vaccination, together with the addresses of ten medical men, including two professors of anatomy, who had suffered in their own families from vaccination."

On page 67, the same author presents statistics from London smallpox hospital reports, which show a remarkable increase of smallpox after vaccination.

"The number of cases of smallpox after vaccination has steadily risen from about five per cent. at the beginning of this century to forty-four per cent. in 1845, sixty-four per cent. in 1855, seventy-eight per cent. in 1865, ninety per cent. in 1875, and is now about ninety-six per cent. of the whole number of cases admitted."

On page 71, we find statistics showing very unfavorably to vaccination:

"Dr. Ducharme, speaking of an epidemic in 1868, which broke out in his

regiment (Valtigueurs of the guard) a few months after he had re-vaccinated it, says: 'To what should we attribute this epidemic in a regiment in which 437 re-vaccinations had been performed, and where the hygienic conditions, as to space, ventilation and food, were excellent, when in the Second regiment of Valtigueurs—lodged in a precisely similar barrack, situated in the same court, but on whom no vaccination had yet been made—not a single case of smallpox existed.'"

On page 72, he says vaccination in Bavaria is enforced by national law.

"In the Kingdom of Bavaria, where no one, for many years, except the newly born, escaped vaccination, there were in the epidemic of 1871 no less than 30,742 cases of smallpox, of whom 29,429 had been vaccinated, as shown by the documents of the state department."

In our own country, especially in the cities of New York, Boston, Baltimore and Chicago, statistics show decidedly against protection by vaccination.

It would seem unnecessary to present statistics to observing physicians who have had experience in the treatment of smallpox. I believe it a safe prediction that three-fourths of the cases of smallpox are subjects of vaccination.

While in charge of a smallpox hospital during the late war, of three hundred and seventy-four admissions, only three had not been vaccinated; three hundred and forty-three had been vaccinated after enlistment. Five were confluent. Of the five cases of this type, two had been twice re-vaccinated, the last time after enlistment, and by myself. The remaining three had one re-vaccination after enlistment, also by myself.

It is time the public should be undeceived upon the source of the virus in general use. It is not cowpox spontaneous, or inoculated from the horse grease.

It is smallpox propagated from human beings through *calves* to human beings again; or, it is the far-fetched Beauagency virus. It was announced in 1866 that a case of natural cowpox had been discovered at Beauagency, France. Please observe that it came from one cow, has been in use about twenty-one years, and is offered to the profession humanized or vitulated. A child was vaccinated from this cow about twenty-one years ago, and the virus has passed through thousands of transmissions. Let some expert estimate the amount of protection it gave the last child vaccinated, and as the virus may have been corrupted by each transmission, the frightful exposure to various vaccine diseases.

The vitulated has, doubtless, been transmitted through thousands of calves.

[To be Continued.]

Of Potent Interest.

HERE is every probability that at no distant date the SOUTHERN JOURNAL OF HOMEOPATHY, a leading technical periodical which has hitherto been published in Austin, will make its home in San Antonio. Dr. C. E. Fisher, who has built the journal up to its present enviable standpoint, will sever his connection with the magazine on account of an extended projected trip to Europe. Dr. G. G. Clifford, of this city, it is understood, has completed negotiations by which he becomes proprietor and responsible editor of the publication. Dr. Clifford is a young practitioner of the school of Hahnemann of great ability and is in every way capable of successfully carrying on the work so ably commenced by Dr. Fisher and The Times has no hesitancy in predicting that under such careful and talented control the star of the "Southern Journal of Homeopathy" will not wave, but on the contrary diffuse stronger rays of brilliancy. —S. A. Times.

A Medical Curiosity.

"Memorabilien" cites the following case from "Aerztliche Mittheilungen aus Baden": A farm laborer and criminal, thirty-two years of age, who, up to the time of the occurrence, had always been in good health, after confinement for nine months began to pass large pieces of tape-worm. The usual treatment produced after four hours an enormous convolution of tape-worms, in which a whole row of heads was plainly visible. Careful examination revealed the presence of not fewer than twenty-five well-marked examples of *Tænia solium* in different stages of development, and all with the heads attached. Inquiry revealed that the patient had for years been in the habit of eating as much as half a pound of raw pork daily, which was sufficient explanation of the origin of the trouble. It seemed strange, however, that the bearer of this brood of tape-worms had not only shown no symptoms of their presence, but for the nine months of his confinement had grown fat on the prison fare.—*New York Medical Journal*.

Inebriety.

1. Inebriety is a vice, not a disease.
2. Hospitals for the insane are not the proper places for the commitment of inebriates.
3. A correctional or penal institution should care for inebriates.
4. Inebriates should be sentenced, after a trial by a judge, for a definite time.
5. While imprisoned inebriates should support themselves, and repay to the state the cost of their trial and the damage they may have done.
6. Hopeful treatment consists in daily work, out of doors as far as possible, for a long period in an institution by themselves, under influences that are strongly religious.—*Nathaniel Emmons Paine*.

A Correction—By Dr. Morrow.

TO THE JOURNAL.

Please correct last line on page 370, (December issue of THE JOURNAL), "bold" should be "cold." In left hand column page 371, under "Appetite and Taste," "eating and drinking relieved empty weak feeling in stomach," instead of "retired" as the types make me say. Page 371, right hand column, "eructations" instead of "eruptions."

You will notice that Dr. Lillienthal calls attention to the value of *chionanthus* in splenic disorders. In speaking of enlargement of the spleen Dr. Lillienthal says: "I verified this symptom several times, especially where this enlargement is rather non-malarial. It deserves an especial place in splenic leucaemia."

Drug Action.

Every drug has a two-fold action upon an organism. Whatever action it may have there is a corresponding re-action, constituting primary and secondary effects.

Drugs which produce a certain set of symptoms in an organism, when given in the proper quantity, will relieve these symptoms when they are caused by some other force otherwise than the drug given when administered in appreciable doses.

Abortive Treatment of Syphilis.

The treatment consists in the cauterization of the chancre with the Paquelin cautery, after having previously produced local analgesia with a solution of cocaine. Six patients were experimented upon and four of them failed to present secondary manifestations. There seems to have been no doubt of the specific nature of the lesions, as nearly all of those who imparted the disease were examined and found to have syphilis—*Giornale ital. della Mal Venerea*.

Materia Medica.

Answers.

By H. C. Morrow, M. D., Sherman.

- abruptly, Hyos.
- falls asleep while going, Arn.
- Bapt. Hyos.
- correctly.
- — commences to, but passes into senseless, irrelevant talk, Atrop.
- — but delirium at once returns, Arn. Bell. Hyos.
- — — immediately stupor returns, Hyos.
- — — intellect beclouded, Colch.
- — — takes no notice of things around, Phos.
- — — quickly, as if angry, Rhus tox.
- — — short and incomplete, Anac.
- — — slowly, Cocc. Nux-m. Rhus tox.
- — — wanders when left to himself, Strych.
- cannot hold mind on subject long enough to, Rhus tox.
- confused as if thinking of something else, Mosch.
- Do not correspond, Bell. carbo.-v.
- disconnected, Crotal hor.
- effort, as if after only a great, Sulf.
- hastily or reluctantly, Rhus tox.
- incoherent, Cyc. Valer. Vipera tor.
- imaginary questions, Atrop Plumb.
- — — — shortly and abruptly, Hyos.
- — — with words and gesticulations, Tarent.
- incompletely but correctly, though short, Anac.
- incorrectly, Pb.
- — of which he is conscious, Merc.-sol.
- — not at all, Hyos. Phos.
- — or short, Phos-ac.
- — and short, or reluctantly and slowly, Phos.
- but understood correctly, Cham.
- with indignation, Puls.
- makes irrelevant, Bell. Hyos. Nux-m.
- Phos-ac.
- "let me alone, I will soon be better," Zinc-ac.
- a long time in giving, Anac. Nux-m.
- in monsyllables, Crotal-cas. Hyos.
- Phos. Plumb.
- A "no," answers all questions by, Crotal-cas. Hyos.
- — — — or replies wrongly, Phos.
- yes or no, — —, Phos. Plumb.
- "nothing is the matter," when asked if sick, Apis Arn.
- rationally in delirium when spoken to, Camph.
- — then loses himself in irrational talk, Plumb.
- refused to, Act-rac. Agar. Amb. Arn Arsen. Bell. Camph. Cinch. Coloc. Euphr. Hyos. Lyssin. Merc-v. Nuxv. Petr. Phos-ac. Stram. Tab. Tarent. Verat-alb.
- reluctantly or hastily, Rhus tox.
- — and slowly, Phos-æ.
- — — or short and incorrectly, Phos.
- repeats the question before answing, Zinc.
- rubs his forehead before he, Verat-vir.
- short, Bry. Hyos.
- — and abruptly to imaginary questions, Hyos.
- — or incorrectly, Phos-ac.
- — and incompletely, but correctly, Anac.
- — — incorrectly or reluctantly and slowly, Phos.
- sings and talks but answers no questions, Agar.
- slowly, Hell. Merc-i-r.
- — but correctly, Cocc. Nux-m. Rhus tox.
- — as if he forgot his word, Op.
- — and reluctantly, Phos-æ.

— slowly and reluctantly or short and incorrectly, Phos.

— has to think a long time before he can, Cup-ac, Grat.

— when touched or spoken to, but knows no one, Cic.

— turns head to wrong side when addressed, Atrop.

— — — — right side but does not answer correspondingly, Bell.

— gives unintelligible, Cinch.

— unwillingly, Phos-ac.

— waits some time before giving, Grat.
Nux-m. Pb.

The following notes from practice are given by Dr. Bonnino, in *L'Omiopatica in Italia*, IX., 1888:

Actea racemosa 6 again showed its curative action in sciatica, when the pain was ameliorated during rest, and as much on the right side as on the left, especially in women.

Æsculus hippocastanum 3 gave quick relief when leucorrhœa was associated with anæmia and hemorrhoids.

Alcohol sulphuris 18 brought about almost entire restoration in an individual with incomplete primary dementia, who had passed his sixty-sixth year. He had inherited the apoplectic habitus, had suffered for a long time with farthritic trouble and herpes multiforme, with irregular circulation, giving reason for supposing advanced atheroma of the cerebral vessels. The morbid condition was especially shown by the nearly constant somnolence, taciturnity while awake, total lack of recognition of his attendants' faces, neither sensory nor motor paralysis, unconscious micturition and defecation, later either absent or involuntary; food and drink were taken, but not requested; tongue clean, pupils normal, face apathetic, without contraction or change of color; pulse more or less irregular and intermittent, but not feverish.

The cure began with an outbreak of acne on the back and furuncles on the pelvic region.

Baryta, opium, anacardium had acted but little or not permanently; *phosphoric acid* helped to restore the muscular tone.

Capsicum 6 in a few cases of dyspepsia with gastric dilatation, following an excess of strong, piquant articles of food.

Coccus cacti 2 in chronic catarrh of the bladder, with abundant mucous sediment, red urine, frequent desire day and night.

Concholinum 3x acted favorably in an osteomyelitis already open and suppurating, in the little finger of a scrofulous boy.

Ferrum phosphoricum 3x produced a prompt and salutary effect in rheumatism of the arm and of the right shoulder, chronic and aggravated by rest.

Filix mas acted well in helminthiasis (oxyuris) with much nausea and salivation.

Iodium 30 soon caused a softening and resolution of several indurated glands in the right mammary region and axilla of the same side, appearing after the menopause and persisting for more than a year.

Petroleum 6x confirmed its efficacy in a left dacryocystitis in a scrofulous boy.

Podophyllum 6 in anæmia with prolapsus uteri, both in elderly women and in relapsing cases.

Veratrum album X cured in a few cases of dyspepsia following the use of tobacco (chewing), although not accompanied with vomiting and diarrhœa.

The prefeffion of the south, and Texas in particular, loses an energetic, zealous and enthusiastic supporter of the principles of Hahnemann in the person of Dr. C. E. Fisher. What is one's gain is another's loss. Texas loses. California gains. California, we congratulate you.

Legal.

Law of Texas Regulating the Practice of Medicine.

So many are the questions as to what is the law of this state governing practitioners of medicine, that it is thought best to publish the law as it is, in this issue, without any comment whatever, leaving its construction of meaning to future articles in this journal. The legislature is now in session and it is not known if they will in any way interfere with the law as it is at present.

PHYSICIANS.

ARTICLE 3625. The presiding judges of the district courts of the several judicial districts of this state shall, as soon as practicable, severally appoint a board of medical examiners for their respective districts, which appointment shall be in writing and signed by the judge making the same, and delivered to the person appointed.

ART. 3626. Said board of medical examiners shall be composed of not less than three practicing physicians of known ability, and who are graduates of some medical college recognized by the American medical association, and who are residents of the district for which they are appointed,

ART. 3627. The appointment of a member of the board of medical examiners shall continue for two years from the date of such appointment.

ART. 3628. The board shall, immediately after appointment, select one of their number president and one secretary, and adopt all necessary rules for the guidance and control of their meetings.

ART. 3629. Said boards shall meet regularly, semi-annually, at some central point in their respective districts, to conduct examinations and grant certificates

as hereinafter provided, and they shall give at least one month's public notice of the time and place of their meeting, by publication in at least one newspaper published in the district in which such meeting is to be held.

ART. 3630. Each and every one of such boards shall procure a seal, as soon as practicable after their organization, which seal shall be impressed upon every certificate granted.

ART. 3631. Whenever a vacancy occurs in any of said boards, the same shall be filled by appointment by the judge of the district in which such vacancy occurs.

ART. 3632. It shall be the duty of said board to examine thoroughly all applicants for certificates of qualification to practice medicine in any of its branches or departments in this state, whether such applicants are furnished with medical diplomas or not, upon the following named subjects, to-wit: Anatomy, physiology, pathological anatomy and pathology, surgery, obstetrics and chemistry; but no preference shall be given to any school of medicine.

ART. 3633. When the board shall be satisfied as to the qualifications of an applicant, they shall grant to him a certificate to that effect, which certificate shall entitle the person to whom granted to practice medicine in any county in this state, when the same has been recorded as required by article 3635.

ART. 3634. Any two of the members of such board of medical examiners may grant a certificate of qualification to an applicant, and any member of said board shall have authority to grant a temporary certificate to an applicant upon examination until the next regular meeting of the board, at which time the temporary certificate shall cease to be of force.

ART. 3635. The certificate provided for in the two preceding articles shall, before the person to whom it is granted, is

entitled to practice by virtue thereof, be recorded in the office of the clerk of the district court of the county in which such practitioner may reside or sojourn, in a well bound book to be kept by the clerk for that purpose, and when so recorded the clerk shall certify thereon under his official seal the fact and the date of such record, and shall return such certificate to the person to whom the same was granted, and shall be entitled to demand and receive for such service, from the holder of such certificate, the sum of one dollar.

ART. 3636. The board shall be entitled to demand and receive from each applicant examined the sum of fifteen dollars, whether a certificate be granted to such applicant or not.

ART. 3637. The provisions of this title shall not apply to the following persons :

1. To those who may have been already qualified for the practice of medicine under an act, entitled, "An act to regulate the practice of medicine," passed May 16th, 1873.

2. To those who have been regularly engaged in the general practice of medicine, in this state, in any of its branches or departments, for a period of five consecutive years prior to the 1st day of January, 1875.

3. To females who follow the practice of midwifery strictly as such.

ART. 3638. No person, except those named in the preceding article, shall be permitted to practice medicine in any of its branches or departments, in this state, without first having obtained and recorded a certificate of qualification from some authorized board of medical examiners, as hereinbefore provided ; and any person so offending shall be punished as provided in the penal code.

PENAL CODE.

Chapter III—Unlawful Practice of Medicine.

ARTICLE 396. If any person shall practice medicine, in this state, in any of

its branches or departments, or offer or attempt to practice, without first having obtained a certificate of professional qualification from some authorized board of medical examiners, he shall be punished by fine of not less than fifty nor more than five hundred dollars.

ART. 397. Each patient visited or prescribed for, or each day's offer to practice, shall constitute a separate offense under the preceding article.

ART. 398. If any person shall hereafter engage in the practice of medicine in any of its branches or departments, without having first filed for record with the clerk of the district court of the county in which such person may reside or sojourn, a certificate of professional qualification from some authorized board of medical examiners, he shall be punished as prescribed in article 396.

ART. 399. The provisions of this chapter shall not apply to any person who has been regularly engaged in the general practice of medicine, in any of its branches or departments, in this state, for five consecutive years prior to January 1st, 1875 ; nor to any person who may have legally qualified himself to practice medicine under the provisions of an act entitled "An act to regulate the practice of medicine," passed May 16th, 1873 ; nor to any female who may follow the practice of midwifery strictly as such.

Societies.

The Institute Session of 1889.

Editor SOUTHERN JOURNAL OF HOMEOPATHY :

As a further announcement respecting the institute session of 1889, I have to report as follows :

The bureau of surgery has received assurances of aid from a number of our distinguished surgeons and will present

a series of papers on "Surgery of the Brain," including cerebral localization, symptoms of cerebral tumor, its diagnosis and treatment; abscess, gunshot wounds, tumors of the dura mater, compound and depressed fractures, epilepsy from fractures, and indications of trephining.

The bureau of pædology has promise of active aid from several co-workers in that department, and is encouraged with prospects of a good report on "Preventive Medicine in Pædology."

The bureau of obstetrics is engaged on a report which will embrace nine papers relating to "Puerperal Complications." All these papers are to be the work of well known obstetricians.

Encouraging reports are being received from individual members of the bureaus of clinical medicine, sanitary science, ophthalmology and gynaecology.

The committee on medical education will present a careful report, embodying the views and suggestions of its various members. There will be no separate papers.

Notice is also given that, as the chairman of the committee on pharmacy has resigned, involving also his withdrawal from the committee on organization of provers' clubs, the president has appointed as chairmen of these committees, Drs. T. F. Allen, of New York, on the former, and C. Wesselhoeft, of Boston, on the latter. Those having business with these committees should note the change.

PEMBERTON DUDLEY,
General Secretary.

TEXAS ASSOCIATION BUREAU.

The following are the Bureau appointed at the last meeting of the Texas Homeopathic Association for the ensuing year:

Materia Medica—Drs. Tertius Marks, Sipe Springs; H. C. Morrow, Sherman;

E. E. Davis, Dallas, and J. G. Achenbach, Denison.

Practice—Drs. G. W. Sherbino, Abilene; S. W. Cohen, Waco; Frank Hines, Corsicana, and G. G. Clifford, San Antonio.

Surgery—Drs. J. W. Barnett, Big Springs; Thos. H. Bragg, Austin; J. H. Blake, Houston, and J. R. McKenzie.

Obstetrics—Drs. A. T. Hall, Waco; J. W. Barrett, Gainesville; W. F. Bayliss, Wayland, and ——— Higgins.

Paedology—Drs. C. E. Fisher, ———; J. W. Dickey, Weatherford; M. S. Metz, McKinney, and G. J. W. Kirk, ———.

Gynecology—Drs. Joseph Jones, San Antonio; W. F. Thatcher, Dallas; J. R. Pollock, Ft. Worth, and H. C. Morrow, Sherman.

Ophthalmology—Drs. A. P. Davis, Dallas; R. B. Leach, Paris, and W. G. McKenzie, Weatherford.

Climatology—Drs. ——— Evarts, ——— Z. T. Lillard, Tyler; H. B. Styles, Abilene, and G. St. Clair Hussey, Brenham.

Institutes — Drs. T. G. Edwards, Blanco; M. A. A. Wolff, Gainesville, and Thos. Houghton, Dallas.

The Missouri Institute of Homeopathy meets at Springfield on the 23d, 24th and 25th of April next. A large attendance is expected. Dr. J. P. Dake will be there with a paper on "The True Line of Homeopathic Progress." A. C. Cooperthwaite, M. D., with a paper upon Hydrophobinum; Geo. M. Ockford, M. D., with a paper upon Generalization in the study of the Materia Medica. Among other Doctors—J. S. Mikhill, Wm. E. Green, J. H. Buffman and E. Lippincott will be in attendance. Homeopathy will receive an "Almighty" send off at the hands of Dr. Moses T. Runnels, the live and efficient secretary.

To the Members of the Southern Homeopathic Medical Association :

Some days since I received a note from Dr. Edwin M. Hale requesting me to forward him a list of the names of members of the association, it being his purpose to mail each one a reprint of his able article lately read at our Louisville meeting. I am not in possession of such a list, and I hereby request all members to forward their names and addresses to Prof. Hale, at No. 65 Twenty-second street, Chicago, and receive the pamphlet: "The Relation of Heart Diseases to Diseases of Various Organs."

Prof. Hale will see this and will understand my failure to comply with the above mentioned request.

HOWARD CRUTCHER,
Corresponding Sec'y.

Memphis, January 25, 1889.

The Westboro Insane Hospital—A Comparison.

AMONG the annual reports of the establishments for the cure or confinement of the insane in New England, that of the Westboro Homeopathic hospital is unique. This might be expected from the fact that it is the youngest of them all, and the only one in which homeopathy is the basis and standard of medical treatment; but there are other circumstances which single it out for special remark. During the two years of its existence (it was opened December 6, 1886,) it has reported a large and advancing rate of recovery from insanity among its patients, while other New England hospitals generally show a small and declining rate.. What makes this the more noticeable at Westboro is the fact that among the 800 persons, more or less, who were admitted in the first two years, not 400, or less than one-half, were for the first time admitted to a hospital; while nearly 300 were directly carried to

Westboro from other asylums. It is a well known fact that few recoveries occur among the chronic insane—those who have been a long time in that state are much less likely to recover than those who are recently attacked. The chances were, therefore, that the new hospital would have fewer recoveries to report than several of the old ones, in proportion to the whole number under treatment. Yet among less than 750 different persons under treatment up to October 1, 1888, at Westboro, 133, or more than one-sixth, were put down as recovered; while at Danvers, among 1,500, hardly more than 140 recovered, and at Taunton, out of 1,150, only 109, and at Worcester, among 1,400, only 155 recovered. A part of this difference, but not a large part, is explained by the fact that Dr. Paine, of the Westboro hospital, reports the restoration of an inebriate to sobriety as a recovery, which the other superintendents do not. Thus among 628 different patients in the last year, Dr. Paine finds 78 recoveries, of whom 12 were inebriates restored, leaving 66 recoveries from insanity among about 600 patients—or 11 per cent.

Now this would formerly have been reckoned a small percentage, and there are regions still where it is—for at the North Texas hospital, in the same year, Dr. Wallace reports 81 recoveries among 372 patients, more than 20 per cent. But in Massachusetts, and New England generally, for the past ten years, the rate of recovery has been much lower than formerly, it being demonstrated by Dr. Earle that the old rate was kept up by reporting many recoveries of the same person, and by a low standard of mental soundness in the minds of hopeful or advertising superintendents. Nothing would be more acceptable than a return in good faith, and upon well supported evidence, to the old ratio of recoveries,

or to that which prevails in northern Texas; but few among the experts in mental disease now expect this, and we imagine that Dr. Paine, after five years' experience and the sight of some hundreds of relapses among his own patients will be less willing to report as he is now doing. He will probably accumulate in his hospital a great stock of incurable cases, and will see that the majority, even of new cases are incurable when admitted for the first time. To show the practical results of hospital treatment upon old cases in Massachusetts, we will cite a few figures taken from authentic records.

Nine years ago last October there were 2598 patients in the state hospitals and asylums of Massachusetts. At the same date (October 1) this year 1091 of these same persons were living insane in the same establishments, or the new ones since opened at Bridgewater and Westboro; 80 were living in city and town almshouses, and 870 had died insane; making a total of 2041 whose insanity is thus known to have been "permanent. Of the other 557, there is no reason to believe that more than 300 died sane, or are now living in that condition; so that the utmost that can be claimed for 2600 patients is that 300 of them permanently recovered in nine years,—less than 12 per cent. At least 35 of these old cases were at the Westboro hospital last October, among the 406 patients then under treatment, or more than a twelfth part of the population. Of the whole 2598, 351 were living or had died at the Worcester hospital; 404 at the Worcester asylum; 338 at the Taunton hospital; 296 at Northampton; 240 at Danvers; 233 at Tewksbury; 38 at Bridgewater, and 35 as above mentioned at Westboro. Now as the whole population of these state establishments for the insane, October 1, 1888, was not far from 3900, of whom 50 were

inebriates, it follows that the 1091 old cases (none less than nine years old) were 28 per cent. of the whole insane population. These are very suggestive figures.

In another respect the Westboro report is peculiar,—the work in pathology which it details, and the operations, successful or otherwise, performed there. This new state hospital seems to be the only one in which pathological work is now made public, and that in which it is pursued with the most zeal. It maintains a special pathologist, and in connection with the instruction there given to a class of medical students from Boston university. It utilizes this pathological work to good advantage. This class has averaged about 30 and has made five visits to the Westboro hospital, beginning early in November and closing on the 21st of December. This fact does not appear in the annual report, which comes down only to October; but previous visits of a class of the same homeopathic medical school are mentioned; and it is intended to continue the practice. This is greatly to be desired; for, though there are objections to the clinical instruction of students at insane asylums, the advantages to the public far outweigh the evils; and the system pursued at Westboro seems to be a very careful and judicious one. It has the incidental effect of making the resident physician more observant than they otherwise might be of all the phases in which disease manifests itself in an insane person. This, indeed, is required by the homeopathic system of treatment, and to this, and the diminished use of drugs for sedatives and stimulants, must be ascribed any real increase in the number of recoveries under this system. Its friends claim such an increase, but only time can determine how justly.

The opening of a new hospital is always costly, and the average weekly cost of each patient is large, until the

wards are full and the service well organized. In this respect Westboro compares favorably with the last new hospital previously opened, at Danvers. The weekly cost at Danvers for the first broken year was more than \$9; for the first full year, more than \$5, and for its third year more than \$4. At Westboro the cost of the first broken year was \$5.60 a week, and for the first full year \$4.79. The annual appropriations made by the state, beyond the price of board, were at Danvers for years \$20,000 or more; at Westboro this year only \$16,000, and apparently \$15,000 will be enough for 1889. The Westboro buildings prove to be convenient and rather attractive to private patients; and the management, considering all its difficulties, has been good. Experience will correct what is still defective in the methods there pursued; and it is the most available place for building a new chronic asylum, when that is needed.

"In spite of its frequency and importance, neurasthenia, although long recognized in a vague way among the people and the profession under such terms as 'general debility,' 'nervous prostration,' 'nervous debility,' 'nervous asthenia,' 'spinal weakness,' and more accurately by some of its special symptoms and accompaniments, as 'spinal irritation,' 'nervous dyspepsia,' 'oxaluria,' cerebral and spinal anæmia and hyperæmia is even now but just beginning to find recognition in the literature of nervous diseases. It is at once the most frequent, most interesting and most neglected nervous disease of modern times."—*G. M. Beard.*

A practical treatise on the above subject, with the following arrangement: Symptoms, nature and diagnosis, prognosis and sequences, treatment and hygiene of nervous exhaustion, is now offered to the profession. It is the out-

come and represents the experience of a long and active professional life. By George M. Beard, A. M., M. D., revised and enlarged by A. D. Rockwell, A. M., M. D. Price, \$2.75. E. B. Treat, 771 Broadway, New York, is the publisher.

Definitions.

Homeopathy is a system of medicine in which such remedies are administered for the cure of the sick, of such a quality, as to excite in the healthy organism, a totality of symptoms, the most similar to the totality of symptoms presented by the sick.

There are a great many things in this world we don't know, and very few things we do know.

Knowledge grows by accretion.

FEVER—Is a rise in the temperature of the body, following a corresponding depression. It is not the disease. It is a symptom and nature's effort to relieve where damage has been done. It is her means of destroying worn out tissue in disease.

Nutrition is a reservoir from which vital forces arise.

The proper development and position of every cell, harmony of every organ and desire, and perfect conditions of soul and body, co-operation of both, constitute harmonious physiology or health.

Disease is any disturbance of the harmony or equilibrium of the vital force, and is manifest, first as a modification of the normal function of a part, or the whole organism, usually only a part. This disturbance usually consists in an elevation of functional action of an organ, or organs, followed by a corresponding depression, or general prostration.

The Importance of the Microscope in the Treatment of Sterility in Women.

Dr. H. Marion Sims, of New York, in this paper remarked that the gynæcologist was consulted more frequently for sterility than on account of any other symptom. Simpson affirmed that one marriage in eight was unfruitful. Impotence in both the male and the female might be either real or apparent. In the male it might be congenital or acquired; spermatozoa might be absent in consequence of disease, especially gonorrhœa with accompanying orchitis. In deciding upon the cause of sterility in a given case, we should ascertain if both the male and the female were competent to have connection, if the spermatic fluid contained zoosperms, and if they lived after being deposited in the vagina. In order to determine the latter point a drop of semen was examined microscopically soon after coition.

Sterility was sometimes curable and sometimes not. If it was shown that the male was healthy, the female should be examined with a view to determining if there was any obstacle to the passage of the semen into the uterus. With regard to the physiology of ovulation, it was probable that the ovum was fructified in the Fallopian tube. Spermatozoa had been found alive in the tube, and even at the fimbriated extremity, within ten hours after copulation. If there was any obstruction to the passage of the ovum into the uterus, sterility would result, as in constriction or torsion of the tubes by pelvic adhesions. Any marked and permanent uterine displacement would interfere with conception. Diseases of the endometrium, and tumors, were also causes. The os tincæ might be so small that the spermatozoa could not enter the uterus; in that case it should be dilated according to one of the usual methods. In cases of acute cervical anteflexion, in-

cision was the best treatment; the reader had never seen an accident follow this operation, while sterility had frequently been cured. Many gynæcologists failed to accomplish the desired result, because they did not treat the patient after the operation, so as to remove from the cervical canal the abnormal secretion that killed the spermatozoa. The cervical mucus should be translucent. A drop should be removed a few hours after intercourse and examined with the microscope; this was best done by means of a curved glass tube attached by rubber tubing to a uterine syringe. If the spermatozoa were found in a dead or dying condition, the secretion must be in an abnormal condition, and hence the endometrium must be diseased. At the same time the general health of the patient might be perfect.

Erysipelas and Tuberculosis.

"As the result of experiments, M. Solles concludes that erysipelas retards the evolution of experimental tuberculosis in the guinea-pig; the animals may survive twice as long as when erysipelas is not produced in them. This survival is all the more remarkable since experimental tuberculization in the guinea-pig causes a general tuberculosis which is much more rapid and much more serious than human pulmonary phthisis. The antituberculous action of erysipelas is double: if has a general influence, as shown by the prolongation of life; and it has a local influence, limited to the erysipelatous area, causing the induration, ulceration, and lymphatic swelling due to the tubercle to disappear. This localized action, clearly antagonistic to tubercle, is of such a nature, argues M. Solles, as to encourage the search after some parasite which shall have power of destroying the bacillus tuberculosis."—*Lancet*.

The Treatment of Bubo.

So long as there is no fluctuation or redness, rest alone is recommended. When hyperæmia appears, a compress soaked in carbolic solution should be applied until suppuration takes place. The incision should be made parallel to poupart's ligament, and should be sufficiently large. All affected glands, whether involved in the suppurating process or not, should be removed either with the fingers, the blunt knife-handle, or the curette. If the skin shows any signs of gangrene, those parts should be removed with the scissors. The wound should be thoroughly disinfected, and filled with iodoform gauze. Smith does not believe in the suture, as union by first intention is a rarity, and even then the cure requires as long a time as with the open treatment. He generally changes the dressing but three times. The first dressing is kept in place from two to five days. When taken off the edges of the wound are cleansed with five percent bichloride of mercury, the cavity is filled with iodoform without irrigation or tampons, and a dry bandage replaced. The second and third bandages are applied in the same manner after from five to ten days.—*Therapeutic Gazette*

Amputation of the Pregnant Uterus.

Mr. Lawson Tait thus describes his method of operating: "My method of operating is to make an incision through the middle line large enough to admit my hand, and then I pass a piece of rubber drainage tube (without any holes in it) as a loop over the fundus uteri, and bring it down so as to encircle the cervix, taking care that it does not include a loop of intestine. I then make a single hitch and draw it tight around the cervix, so as to completely stop the circulation. I give the ends of the tube to an assistant, who keeps them well on the strain, so as to

prevent the loose knot from slipping. I then make a small opening in the uterus, and enlarge it by tearing with the two forefingers; seize the child by the foot and remove it. I then remove the placenta, and by that time the uterus completely contracted, and is easily drawn through the wound in the abdominal wall. The constricting tube will now probably require to be tightened, and the second hitch of the knot may be put on at the same time, and the work is practically done. Stuff a few sponges into the wound to keep the cavity clear of blood, and pass the knitting needles through the flattened tube and through the cervix, and in this simple way a clamp of the most efficient kind is at once made. The usual stitches are put in; the wound closed around the stump, which of course is brought to the lower part of the opening, and then the stump is dressed with the perchloride of iron in the usual way." Mr. Tait further says it is the easiest operation in abdominal surgery, and every country practitioner ought to be able and always prepared to perform it. No special instruments are required—a knife, some artery forceps, and piece of rubber drainage tube, two or three knitting needles and some perchloride of iron.—*Brit. Med. Jour.*, November 17, 1888.

Disease and Habits of Intemperance.

In the *British Medical Journal* Dr. Isambard Owen, of the Collective Investigation committee, arrives at the following conclusions after a study of about 4,000 cases:

1. The habitual indulgence in alcoholic liquors beyond the more moderate amounts has a distinct tendency to shorten life, the average shortening being roughly proportional to the degree of indulgence.
2. That of men who have passed the

age of twenty-five, the strictly temperate, on the average, live at least ten years longer than those who become decidedly intemperate.

3. That in the production of gout and cirrhosis, alcoholic excess plays the very marked part it has been long recognized as doing, and that there is no other disease anything like so distinctly traceable to the effect of alcoholic liquors.

4. That cirrhosis and gout apart, the effect of alcoholic liquors is rather to predispose the body towards the attacks of disease generally than to induce any special pathological lesion.

5. That in the etiology of chronic renal disease, alcoholic excess, or the gout which it induces, probably plays a special part.

6. That there is no ground for the belief that alcoholic excess leads in any special manner to the development of malignant disease, and some reason to think that it may delay its production.

7. That in the young alcoholic liquors seem rather to check than to induce the formation of tubercle; while in the old there is some reason to believe that the effects are reversed.

8. That the tendency to apoplexy is not in any special manner induced by alcohol.

9. That the tendency to bronchitis, unless, perhaps, in the young, is not affected in any special manner by alcoholic excess.

10. That the mortality from pneumonia, and probably that from typhoid fever, also, is not especially affected by alcoholic habits.

11. That prostatic enlargement and the tendency to cystitis are not especially induced by alcoholic excess.

12. That total abstinence and habitual temperance augment considerably the chance of a death from old age or natural decay, without special pathological lesion.

The *Weekly Medical Review* of St. Louis in commenting upon an article in the *Lancet*, says: "If the editor of the *Lancet* will pay us a visit he will find that some American customs and methods, instead of being after highly respectable and worthy of imitation, are good enough for even an Englishman to live by at all times. He will find that there is a law that is strictly enforced in most of our states, making it an indictable offense to carry concealed weapons. Even in Texas, the home of the famous cowboy, this law is complied with." Yes sir, in Texas this law is complied with. There are fewer revolvers carried in Texas than in any other state in the union of equal population. Our state makes it an offense punishable by imprisonment and fine, Law and order reign here. We do not need revolvers.

The *Medical Era* gives good, wholesome advice through its editorial columns upon the subject of abortionists, and very truly says:

"When society has been so reformed that it ceases to flatter the man and to make an outcast of the woman, a period will be reached when the latter will not be driven to seek the destruction of her child, and doctors will not be tempted."

When society has been so reformed that "ladies" will consent to have children, and not consider them an incumbrance and a nuisance, abortions will not be necessary, and doctors will not be tempted.

This reform is a long way off, but it will come.

The *Advance* and the *Medical Era* are not agreed in their expressions of opinion towards the *Chicago Times*, the *Advance* claiming that the *Times* has conferred a lasting benefit on the public and should

receive the thanks of the profession for showing who the vampires are." The *Era*, that "under pretense of making a disinterested effort for the reform of the medical profession, it has simply made use of this social evil in order to get up a sensation, increase its circulation and put money in its coffers," and asks: "What good, if any, is to come of all this agitation?" "For our part, we regret to see the unsavory stuff paraded in the secular press, unless it is to result in great and permanent good, which we very much doubt."

To Frequent Use of the Forceps.

That the obstetric forceps are too often used is generally admitted; that teachers have been too tame in their denunciation of their abuse is equally true. Dr. Joseph Price, of Philadelphia, however, speaks in no uncertain tones; in the discussion upon the use of the forceps before the American Association of Obstetricians and Gynecologists, he said that for years he has condemned the use of forceps in no unqualified language. While in hospital he singled out three hundred cases of labor, in twenty-five of which the forceps were used; in none of the twenty-five cases was there the slightest indication for the use of forceps. He said, further, that he has gone to three hundred successive cases without taking his forceps out of their bag. Good! In the Philadelphia Society one man once said he could not attend a poor woman for five or ten dollars unless he were allowed to use the forceps; but he received such a rebuke that it was five or six months before he had the temerity to return.—*Kansas City Medical Index*.

The Constipation of Infants.

In all cases where an infant's bowels are habitually costive, it is of the first

importance to enter thoroughly into the questions of clothing and diet. In addition, care should be taken that the bowels are regularly stimulated by manipulations from without. The sluggishness of peristaltic action, which forms a part of every case of habitual constipation, may be very materially quickened by judiciously applied frictions. The nurse should be directed to rub the child's belly every morning after the bath. She should use the palm of the hand and ball of the thumb, and, pressing gently down on the right side of the abdomen, carry the hand slowly around in a circular direction following the course of the colon. The frictions may be continued for five minutes. In obstinate cases the child may be laid down upon the bed, and the bowels gently kneaded with the thumbs placed side by side; but in this case, too, the movements should follow the course of the larger bowel.—*Medical Era*.

Absolute Signs of Death.

1. Respiratory failure.
2. Cordiac failure.
3. Reduction of temperature below the natural standard.
4. The presence of rigor marks and muscular collapse.
5. Coagulation of blood in the veins.
6. The presence of putrefactive decomposition.
7. Absence of a red color in semitransparent parts under the influence of a powerful light, such as that from a magnesium lamp.
8. Absence of muscular contraction under the stimulus of an electric or galvanic current.
9. The absence of a red blotch under the skin after the sub-cutaneous injection of ammonia.
10. Absence of signs of rust on a bright steel needle after plunging it deep into the tissues.—*Lancet*.

Tobacco Vertigo.

"Having investigated sixty-three cases of excessive use of tobacco," says the *Lancet*, "Decaisne finds forty-nine to be over fifty years of age. More than half the cases presented, besides digestive derangements, alternating constipation and diarrhoea, an exaggeration of the urinary secretion and more or less abundant sweats, insomnia and palpitation. In thirty-seven cases the smokers pursued the habit fasting, and in these vertigo was present, especially in the morning. The appearance of the vertigo coincides in one-third of the cases with the suppression of the profuse sweats and marked diminution of the urinary secretion. Sometimes the vertiginous symptoms have been confounded with those due to cerebral congestion, and even to heart disease. Besides the absolute suppression of the use of tobacco, laxatives, warm baths, magnesia and bitters are prescribed. Injections of ether subcutaneously also appeared to stop the vertigo in a few minutes."

Leucorrhoea.

G. G. CLIFFORD, M. D.

Sepia—Uterus enlarged, prolapsed and indurated; bearing down pains; retroversion; liver spots; discharge offensive, mucous, white, yellowish or watery; mild and acrid in its nature; itching and stitching pains in genital organs.

Calc. carb—From constitutional causes; chronic leucorrhoea; profuse, itching and burning; milky in color, yellow, purulent; lassitude and depression of spirits. Especially useful before puberty and even in infants.

Borax—Clear, copious albuminous discharge, with unnatural warmth to it.

Kali bi—Ropy, stringy discharge.

Kreosote—Discharge purulent yellow,

but not profuse; it produces intense itching and burning in vulva; tumefaction of cervix; cancerous conditions and bloody ichorous discharges; nausea and leucorrhoea.

Alumina—Discharge profuse, acrid, yellow, ropy and tenacious; it is rich in albumen and exhausts very much from excessive sensual excitement; dreads examination; oversensitive; bluish color of cervix; peculiar constipation; loss of power in lower bowel.

The Cries of Children.

Screams of fear for a minute or two, arousing from a sound sleep of an hour or two, denote a gastric disturbance often superinduced by a cerebral lesion. Periodical screams by day or night characterize a spasm of bladder, chiefly if they cease for some time after micturition. Prolonged screams, increased palpitation, co-existing with fever and sweat, denote ordinarily rachitis, save in the case of diarrhoea, dysentery or vesical lesions.—*Medical Era*.

The Century says: The intensity of modern life and the deepening of consciousness through intelligence breed sadness. We think too much and work too hard to have time for enjoyment, and if we suddenly discover that we have need of it, we take it in inordinate quantities, rather than in simple and natural ways; we go out and buy pleasure at so much the hour instead of somehow contriving to live a mirthful life.

Men who are occupied in the restoration of health to other men, by the joint exertion of skill and humanity, are above all the great of the earth. They even partake of divinity, since to preserve and renew is almost as noble as to create.—*Voltaire*.

Texas Homeopaths.

The State society meets at Fort Worth the second Tuesday and Wednesday in May (7th and 8th.)

Get yourself in readiness and be sure to come, for much is to be accomplished by our united work.

Every homeopath interested in the welfare of the profession should be present to lend a helping hand.

Difference Between Food and Medicine.

Medicine is of such a character as to appeal directly to the forces of the body, and react directly upon the tissues; food acts upon the tissues and indirectly renews vital energy. Medicine, in reaction, is followed by a depression; food is not.

A physician should have his mind well stored with polite literature, and all that is knowable in medicine and its collaterals, and his intellect should not be clouded by the use of alcohol and narcotics; for no physician, I care not to what school he belongs, is capable of treating an obscure or dangerous case, except to hasten it to the grave, if he be mentally and physically incapacitated by his immoral habits.—*A. Givin, M. D., in Clinical Reporter.*

Diagnosis is the art or science of signs or symptoms, by which one disease is distinguished from another. "Sciences are but the development of common sense in special directions; and the science of physical diagnosis forms no exception to this rule." Another valuable auxiliary has been given this arm of the profession in the new work, "Exploration of the Chest, in Health and Disease," by Stephen Smith Burt, M. D., Professor of clinical medicine and physical diagnosis in the New York post-graduate medical school and hospital. The work is very

complete and is destined to occupy a front rank in the profession. D. Appleton & Co., New York, are the publishers.

The *Morning News*, of Savannah, Ga., of the 18th instant, contains the following: "Alderman Herman Myers has fairly won the honor of vice chairman of council, although Dr. Falligant ran a neck-and-neck race for it. Alderman Myers' popularity is shown by his large vote of 2,524 out of 3,400 votes, Dr. Falligant, a prominent homeopathist, receiving the second highest vote cast in the election, to-wit: 2,486 out of 3,400 votes."

Forty-two below zero in Montana. Good gracious! Ye blizzard-stricken homeopaths had better remove to Texas where spring vegetation is showing itself. There is room for you here, also for a thousand or so from the east and New England. Come! Do not fear our state law if you have a diploma "from some accredited medical college" chartered by the state in which the same is situated. You need fear no state examination. That law is a "dead letter."

OF all the survivals of bigotry and intolerance in this afternoon of the nineteenth century, in free thinking America, is there anything quite as absurd as the assumption of one school of medicine that it alone should have the right to doctor people who presumably have brains enough to select a physician to suit themselves.—*New York World.*

Support this journal. It will give you value received. We invite your patronage and ask a perusal of our card directory. When you have patients traveling recommend those, who thus solicit your favors. Do this and encourage the growth of homeopathy in the south.

Pot Pourri and Personal.

Our readers can look for a treat. Dr. Fisher promises us several European letters.

Dr. J. P. Dake, of Nashville, spent the month of December with his son in Hot Springs, Ark.

Dr. E. A. Guilbert, late of Jackson, Miss., has located in Vicksburg, succeeding Dr. Geo. O. Juny, who died two or three months ago.

The death rate in New Orleans per 1000 per annum for the month of November, 1888, was 24.38. Of 72 cases of diphtheria during the week, 24 died.

Dr. Wm. M. Wilke, representing Mess. Gross and Delbridge, of Chicago, passed through the city on his way to our sister republic and paid the JOURNAL a pleasant call.

"Legislate the Schools of Medicine," seems to be the cry of the day. THE SOUTHERN JOURNAL will give its readers a series of articles upon the above subject. Look out for them.

Dr. Thomas M. Stewart, late resident physician of Pulte medical college, leaves for Europe at an early date to further his medical education. The doctor carries with him our best wishes.

Waco is thought to be the homeopathic center of Texas, as there are five homeopaths in that city. El Paso now comes to the front and boasts of five disciples of Hahnemann.

THE JOURNAL returns thanks to the Times and Express, of this city, for kind expressions of welcome tendered us upon our advent in the metropolis of Texas. Brethren, we are here to stay.

The legislature of Maine is now in session, and it is expected that the homeopaths of that state will be compelled to

fight a bill drawn up in favor of the allopaths. Success to those of the stamp of similia.

THE JOURNAL does not remove from the south and "shall always take a lively interest in the affairs of homeopathy in this section," and to further this end wants its professional brethren to help us out whenever they can, with news, subscriptions, ads and whatnots.

Dr. Wells Le Fevre, who has been with Prof. E. H. Pratt for several years, and enjoyed with him the birth, growth and present development of "orificial surgery," is now located at Hot Springs, Ark., and cordially invites physicians visiting the springs to make his office their headquarters.

P. Engelbach, the genial pharmacist of New Orleans, will visit New York and Philadelphia about the first proximo, and on his way homeward proposes to visit Chicago. To our northern brethren—Treat him well, for should you ever fall into his hands upon southern soil a right royal reception you will receive.

Dr. J. R. Pollock, the well known and genial homeopath of Fort Worth, has formed a partnership with a lady physician, Dr. Kellar, from Detroit. Dr. Kellar is the second lady homeopathy in Texas, and is thoroughly qualified in our profession. THE JOURNAL is glad to know that she is meeting with most gratifying success in Fort Worth.

C. H. Clifford, Esq., of this city, has kindly consented to take charge of the legal department of the JOURNAL, and will from time to time write on such subjects as will be of general interest to the profession. He also desires any one wishing information in his line to write the JOURNAL. In this issue we publish the laws of this state as a basis for future articles.

We are not going to California. The south needs us and here we are going to stay. Our former editor will make his home in the far west, but THE JOURNAL will reside in San Antonio, Texas, and look out for the interests of homeopathy of this section. We hope every contributor, subscriber and advertiser will continue with us.

Number 1, volume 1, of the "Clinical Record," a neat eight-page monthly published by W. A. Chatterton, of Chicago, is at hand. It claims to be "a record of clinical cases, materia medica notes and characteristic symptoms," and judging from the first issue it bids fair to *be what it claims*, but it does not tell us who is at its helm.

THE JOURNAL is in receipt of the "Transactions of the Homeopathic Medical Society of the State of New York" and finds in it many suggestions that other State societies would do well to adopt. More especially is it true with reference to the State of Texas, and this reminds us to give every one of our members a "punch in the ribs" to stir them up to the work that is before them.

There is nothing like being substantially welcomed into journalism; nothing so much encourages a new beginner as receiving paying ads. from old houses such as T. Engelbach, of New Orleans, whose standing *trumpet blast* will be found in this number. THE JOURNAL is a necessity in the south, so is T. Engelbach. Both of our institutions are wanted just where we are, and here we will stay. Who's next in turn?

Shortly after the announcement was made in the December issue that THE JOURNAL would be removed, Dr. S. W. Cohen, of Waco, sent out circulars asking the support of the profession for a homeopathic periodical. Upon hearing of THE SOUTHERN JOURNAL'S retention

in the state, the doctor kindly withdrew in our favor, as his motives in getting up the new publication, as stated, were solely for the upholding of our banner in the south.

THE SOUTHERN JOURNAL is retained upon southern soil. Here it proposes to live. It must and should have the assistance of all followers of the law of similars. Help us out. "Pause not to ask your brother what he is going to do; lay by your foolish shibboleths; pause not to count the cost or profit. Do this. Do! Do! and you are ours and all we have is yours."

Because of the advent of a young Dewey of the male persuasion at the office of the *California Homeopath*, there is much rejoicing in that camp. This is the first occurrence of this nature in the home of the junior editor of our worthy contemporary, and congratulations of friends are in order. Ours are most heartily extended, but when we get married we will expect brother Dewey to reciprocate fully upon similar happening at this end of the line.

THE Uterus and Ovaries.

Extract from an Article on the Relation of Abnormal States of the Heart to Abnormal Conditions of the Organs of the Body, by E. M. Hale, M. D., Chicago, Illinois.

It may seem strange that I should connect diseases of the uterus and its appendages with cardiac disorders. It is not so much the acute disorders as the chronic which I shall discuss. No one will deny that inflammatory affections of the heart do have some influence on uterine pathology. We often find acute arterial congestion of the uterus and ovaries, acute hemorrhage, and even dysmenorrhea, aggravated by an enlargement of the heart, or even undue excitement of that organ.

Witness the subsidence of these conditions when the woman is put under the influence of such cardiac sedatives as aconite, sactus, gelsemium, or veratrum viride. But I will not further discuss this point, but proceed to the consideration of chronic maladies of the uterus. The scientific and talented Dr. Mary Putnam Jacobi, in a notable paper published several years ago, observed that "the first link in the chain of uterine pathology is venous stasis." To this cause, she asserts, are due the nutritive changes, the displacements, the flexions, many amenorrhœas, dysmenorrhœas, and hæmorrhages of various kinds, which attend uterine disorders. If you will recall what I have said of the changes in the kidneys, caused by venous congestion, you will more readily comprehend the above statement. Now, as in the kidneys, venous stasis of the uterus is not always due to a failing heart. It may originate in some local disorder, or traumatic condition. It may originate in suppressed menses, after miscarriage, or post-partum. It may be due to a sudden cold or powerful emotion, when the vaso-motor nerves are irritated, resulting in spasm of the arterioles. But these local states may finally result in heart failure, just as undue tension of the renal arteries may cause such changes in the kidneys as will soon result in Bright's disease.

While we are treating these acute disorders by aconite, belladonna, cactus, veratrum viride, aurum, or glonoine, we should be on the watch for that weakness of the heart, more common in women than in men, which so often attends the failing health resulting in any uterine ailment, for as soon as the circulation is weakened, the local disorder tends to become chronic. So soon as the heart loses its power of propelling blood freely and forcibly into the arteries of the uterus, pathological changes are sure to be per-

petuated. If a weakened heart has anticipated any uterine disorder, that organ cannot long remain free from disease. In such cases, local treatment, no matter how skillfully applied, will do but little more than palliate. If a woman gets up from a miscarriage or confinement with a loss of the heart's normal power, as she is sure to do if she has lost much blood, or has not been properly fed or nursed, the acute congestion of the uterus will change to venous stasis, unless we tone up the heart and increase the blood by means of iron and digitalis, china and nux vomica, with nutritious food, fresh air, and proper exercise. If the local weakness results in retroflexion, the pessary will not cure until we restore the circulation to its normal force. That condition called areolar hyperplasia is the same as hyperplasia of the connective tissue of the kidneys. Both are caused by venous congestion. In the former we have scanty menses and sterility; in the latter, Bright's disease and dropsy. If there are structural changes in the heart, organic weakness and chronic venous stasis in the uterus and ovaries become fixed, rebellious to treatment, and often incurable. There are two points I desire to emphasize relating to treatment of chronic diseases of the uterus:

1. That in connection with proper hygienic surroundings, good diet, a pure air, and good climate, we should always prescribe some one of the known and trustworthy cardiac tonics. Those which have an affinity for the reproductive organ, as well as the heart, should obtain a preference. Among the most important of the latter class are nux vomica, ignatia, and the alkaloid common to both, strychnia. There is no drug which is a better energizer of the heart than strychnia. Under its use the hypertrophied and dilated heart decreases in size and increases in thickness. At the same time

the tonicity of the uterus and its appendages is increased and the circulation in those organs equalized. *Convallaria* and *lilium tigrinum* come next in order. The former, as shown by recent provings, acts upon the heart similarly to *digitalis*, while it does not cause the same amount of arterial tension. It has also a specific action on the uterus and ovaries. During its primary action they are stimulated and congested. During its secondary action the heart becomes engorged with venous blood, making them subject to nutritive and structural changes. *Lilium* has a similar action, but is different enough to enable us to differentiate them. *Cactus grand.* has a specific affinity which is well-known to all of you. *Strophanthus* will, I predict, when better known and proven on the female organism, prove to be a valuable remedy in such cases. *Digitalis*, especially when associated with *strychnia* or iron, is of inestimable value in chronic cases, complicated with muscular atony or blood impoverishment.

2. The above remedies when aided by those medicines which have a specific affinity for the reproductive organs, like *sepia*, *calcareo*, *cimicifuga*, *secale*, *aletris*, *hydrastis*, and *viburnin*, enable us to treat successfully all the non-surgical diseases of the uterus.

I fear that I have not presented this subject as forcibly as I should. It demands a more facile pen and a wider experience, but if I have given you food for serious thought, and a fuller appreciation of the value of restoring the normal integrity of the circulation, I shall be satisfied with my endeavor.

E. M. HALE, M. D.

Climate of Southwestern Texas.

The impression prevails abroad that the summer temperature of this portion of the state is exceedingly oppressive. Aside from the length of the summer season, this is a great mistake. The temperature in midsummer is frequently not as high, by several degrees, as in the northwestern states, and the heat is so tempered by the winds that its intensity is greatly modified, so that it is not more

often the subject of complaint than is that encountered in higher latitudes. The nights are always cool and dry. From May to October there is rarely any dew, so that persons may sleep in the draughts, on their porches, verandahs, house tops, or under the trees, with perfect freedom from liability to take cold. Everyone seeks the draughts at night, when with a moderate covering a delightful, refreshing rest is obtained. The writer has had every opportunity of judging of climates of various parts of the United States, ranging from Lake Superior to the Gulf, and from the Atlantic to the Pacific, and he avers without reservation that the summer nights of southwestern Texas are more delightful than those of any interior region south of the great lakes.

It may be said that there are six months of summer, four months of spring and two months of autumn, when the seasons are compared with those known in the northern states. Winter in this country is autumn elsewhere. Winter can hardly be said to commence here, however, before Christmas, and as a rule it ends by the last of February. The *huiscache*, a variety of the *acacia*, blooms then, and spring opens. The first week in March the peach blossoms show their colors, and the primroses appear. The cool weather, it will be seen, scarcely lasts sixty days. The December temperatures are mild, with an occasional rain in the nature of a wet "norther," as they are termed, followed by moderate frosts. These are not, usually, severe enough to kill the roses, honeysuckles or verbenas, or seriously injure the garden vegetables. Lettuce and radishes are in the market to the first of January, and not infrequently throughout the winter. The mean temperature for the month is over 52°, the average hourly velocity of the wind is less than five miles, the skies are clear; there is a mean rainfall of two inches; a mean relative humidity of seventy per cent., with an average dew point of 10.4° below the night temperatures. From the foregoing it will be seen that this month is a pleasant one, and well adapted by the moderate conditions for that daily exercise in the open air which invalids require.—*Reference Handbook of the Medical Sciences.*

Southern Journal of Homeopathy.

NEW SERIES
NO. 2.

San Antonio, Texas, March, 1889.

OLD SERIES
NO. 88.

♦ ♦ Editorial ♦ ♦

Know Thyself.

"Know then thyself, presume not God to scan,
The proper study of mankind is man.
Placed on this isthmus of a middle state,
A being darkly wise, and rudely great;
With too much knowledge for the skeptic side,
With too much weakness for the Stoic's pride,
He hangs between; in doubt to act, or rest;
In doubt to deem himself a god, or beast;
In doubt his mind or body to prefer;
Born but to die, and reasoning but to err;
Alike in ignorance, his reasoning such,
Whether he thinks too little or too much,
Chaos of thought and passion, all confused;
Still by himself abused or disabused;
Created half to rise, or half to fall;
Great lord of all things, yet a prey to all;
Sole judge of truth, in endless error hurl'd
The glory, jest and riddle of the world!"

How Do You Like The Journal?

Our first issue has been sent you, and ere this number reaches you, will have received your criticisms. Hope your judgment will be as favorable as our effort has been to make it a success. It is our first venture in the field of journalism and the task has been one of labor and trials, which hereafter, as knowledge comes to us by experience, will be much lightened. As the wheels of our onward progress wear deeper the ruts of the road we travel, so will routine channels of our re-

sources become more and more easy without going astray, and we look ahead to the period when we will have a better time of it, the principal part of our care being to keep the axles well lubricated—we will have to depend upon you, brethren, to furnish the grease wherewith to keep the thing from making an unseemly noise—for the less friction there is upon the axles the smoother will it run. Another matter deserves great attention, and that is, we must keep from taking the "wrong fork" of the road. Ours is not entirely a straight, well-marked one; in many places "blazes" on the trees are the only indications to be followed. In this, also, we want your help; we want your advice. Read THE JOURNAL closely, criticise it, and every time tell us just exactly, in plain "United States," what you think of it. If there is anything to praise let us have it; it will encourage and cheer us. If there is anything in it you do not like "out with it" and do not be slow or backward of speech; let us benefit by your counsel. Always bear in mind that THE JOURNAL is yours; it is your property to take an interest in. It is one indivisible cause in which we are all vitally concerned, and by our united efforts there is no such thing as making a bad showing before the world. We can climb to the top and must do it. Postage is cheap, and there is no cause

in which you can so profitably put in your time as helping along *THE JOURNAL* to spread broadcast our (almost) Divine doctrine. Write to us, brethren; do it often and at length. Cheer us when you can, find fault where there is occasion, and if you cannot do either, write anyhow and tell us what you are doing; we will do our part and put it before your co-workers in the good cause. Let us get acquainted with each other through the columns of *THE JOURNAL*, and feel that there is a bond of good-fellowship and common interest binding all together and the result will be "a long pull, a strong pull, a pull altogether," that will defy resistance. Money is needed to carry on the enterprise, but that is not all. *THE JOURNAL* must be made valuable—so valuable, indeed, that it cannot be done without, and when such is the case, the money part will take care of itself. That is the point we must strive to accomplish; it is to this end that this appeal is made. It is your close attention, your time, your brain work which we must have. This is not asked for the sake of *THE JOURNAL*, but for all our interests. It will take time to accomplish all we want, but succeed we will. Certainly a class of educated men, such as are our representatives, shown by *THE JOURNAL*'s subscription list, can and will carry out to a glorious issue an enterprise so essential to *OUR* welfare.

No Intermeddling Between Schools.

Texas is said to be the only state in the union having a clause in its organic laws against statutory intermeddling between medical schools. The following explains itself: "The legislature may pass laws prescribing the qualifications of practitioners of medicine in this state, and to punish persons for malpractice, but no preference shall ever be given by

law to any school of medicine."—*St. Louis Medical Journal*.

Our allopathic brethren have for years been trying to get a statutory enactment inhibiting practitioners of medicine, in this state except those who possess diplomas from colleges recognized by the "American Medical Association."

Such a bill was introduced before our legislature in 1885 and was most signally defeated. Another of similar import is expected to come up before the present legislature and it is to be hoped it will suffer the fate of its predecessor.

Our constitution provides that "no man or set of men are entitled to exclusive public emoluments or privileges" and "perpetuities and monopolies are contrary to free government and shall never be allowed."

Let those physicians who possess diplomas from reputable medical colleges and wish a change of location cast their lots upon Texas soil, and fear not the law—it will protect you. There are many excellent locations for representative men in "The Lone Star State," and its best citizens will welcome you.

Nitro-glycerine in Bright's Disease.

Prof. Munasseine has been trying the effects of nitro-glycerine in nephritic cases, and, from a number of observations, concludes that nitro-glycerine diminishes the amount of albumen passed in the twenty-four hours; the amount of urine passed is increased in the twenty-four hours, and this increase is maintained for some time after the cessation of the drug.—*L'Union Medicale*.

In the Medical Advance of May 1888, appears an article from Dr. W. J. Harris, of St. Louis, in which he states: "I desire to call the attention of your readers to the use of glonoine in tubal nephritis. My attention was first called to the use


of this remedy in the above affliction in the year 1880, by Dr. Jackson, of Tottenham, England. Since then I have used it in a number of cases always with benefit. In every case there has been present fever, dropsical effusion, albuminous urine and tube casts."

It looks a little as though "L'Union Medicale's" trumpet is not the first to sound the news of the use of glonoine in Brights' disease. Homeopathy leads the medical world by fifty years.

The Present.

Railroads and telegraphs have consolidated humanity. If a flood occurs in the Celestial Empire, a cyclone in Ceylon, or if two emperors meet on neutral ground to discuss the fate of empires, and to consider the propriety of allowing a few thousands of their subjects to slaughter each other, we read of all these things in the daily press over our coffee the next morning. We are almost able to feel the pulse and note the daily temperature of a sick and be-doctored emperor on the other side of the globe, and we are apprised of his demise before the services of the wrangling physicians have given place to those of the Royal undertaker.

Modern science has pushed its investigations into every department of nature. It has dredged the deepest seas, scaled the highest mountains, analyzed the sunbeam, and resolved the distant nebula. Science has rendered the hardest metals incandescent, and seems only to be gathering breath and strength before it dissolves the elements. Science has thus pushed experiment and analysis, instituted comparisons, weighed, measured, tabulated, systematized and recorded facts.—*J. D. Buck, M. D.*

 Advertise in THE JOURNAL.

THIS is March, then comes April, and in the early part of May, Texas Homeopaths will partake of the hospitality of the denizens of Fort Worth. Fellow associates, bestir yourselves. Make this meeting the grandest success imaginable. Look forward to May 7th and 8th as a time when you will have a respite from your practices and breathe the prairie air of the western city. And when you come, come prepared to do some good.

Prof. Paul F. Munde says the Faradic current can be applied to the following conditions: Insufficient development of uterus and ovaries, amenorrhœa, superinvolution, displacements and intersitital fibroids. Galvanic current: Hyperplasia uterina, chronic ovaritis, and lymphadenitis, pelvic neuralgia, local and reflex neuralgic and mechanical dysmenorrhœa, erosions of the neck, subinvolution, subperitoneal uterine fibroids.

DURING Anæsthesia, if respiration stops, Dr. H. A. Hare, of the University of Pennsylvania, has found that in man and in the lower animals, the free use of ether poured on the belly causes so great a shock by the cold produced by its evaporation as to cause a very deep inspiration, which is often followed by the normal respiratory movements.—*Practice.*

"AN old theory which has been generally accepted is more difficult to dislodge than one which has not rusted in its place. In every science the frame of mind in which theories are approached tinges the whole work of the individual. Theories are intended to be helps; they cease to be of service when they are blindly followed as truths."—*Lancet.*

♦ ♦ Correspondence ♦ ♦

For The Journal.

Our Letter From Chicago.

CHICAGO, Feb. 28, 1889.

DEAR JOURNAL:—Your correspondent is off for a review of several months in surgery and gynæcology, and will visit during the year the seven great medical cities of the world—Chicago, New York, Edinburgh, London, Paris, Vienna and Berlin—in search of knowledge in these departments of our art, and as it may be of interest to your readers to know something of the advantages offered for study and observation in these lines in the cities named, I shall endeavor to give you a letter from each, so that others may, I trust, gain pleasure and profit by my trip and experiences.

Chicago is a great medical center. Here is the great Cook County hospital, the Bellevue of the west, whose multitudinous surgical and medical clinics are open to physicians and students of all schools, and whose facilities for clinical study are not surpassed on the American continent. Through the efforts of the homeopaths of this city, this great institution has been invaded by our school and we have a separate department in it, with a medical and surgical staff of our own and a corps of four internes—bright young physicians—who look well to the interests of those who are assigned thereto. Patients are assigned in numerical order, the allopathic department getting three to our one. Every fourth case, no matter what its name or nature, falls into our hands, and this means a great deal in a public hospital for a county with above a million inhabitants. The faculties of the various medical colleges in close proximity hold clinics in the amphitheatre during the winter, to

which the students of all are admitted upon purchase of the hospital ticket, and by scheduling the hours of all these clinics one can work in an excellent review in any particular department of study. The colleges have all closed for the session of '88-9, and the clinics are not as well in hand as is usual, but it is easy to be seen that the winter's clinical course at Cook County hospital is full of meat to the reviewer or student who gives it attention.

The annual report of this great institution is now in press. When ready, it should be carefully reviewed by our journalists that the facts and figures of each department may be comprehended by the entire profession and that comparisons of results may be made. We are sure these comparisons will redound very much to our advantage, but we are equally confident that they could be made to sing a much louder song for *similia similibus* if the staff would direct their attention to the missionary influences such figures and results have upon the great world of homeopathy removed from the immediate locality of mixed public institutions. The hope is ventured that throughout the year upon which the new staff is about entering this idea will be kept prominently in view, and that every possible effort which will result to the favor of homeopathy will be most faithfully and conscientiously put forth and reported upon.

Immediately adjacent to the county hospital are four medical colleges, viz: the Chicago Homeopathic, the Rush, the College of Physicians and Surgeons, and the Woman's Medical college. Besides these there are three or four more in the city, notably Hahnemann Medical college, on the South Side, in which we are somewhat interested. The eclectics have a college also, and the county commissioners have recently decided to give

them a department in the hospital along with their homeopathic and allopathic brethren. The colleges are all reported to be in a flourishing condition, with good classes and able faculties.

Besides the Cook County hospital, there are several other institutions of this character in Chicago, chiefly under the management of the old school, and the Hahnemann hospital, in connection with the Hahnemann college, under the exclusive management of our school. The latter institution affords ample clinical material for the clinical faculty of the Hahnemann college. Of the allopathic hospitals, the chief are the Presbyterian, St. Luke's, the Mercy, the Michael Rees, the Women and Children's, and the Alexian Brothers'. Taking all in all, this city is well supplied with hotels for the sick, and the facilities for observation and study in these mammoth establishments is all that ordinary mortal need want if he can allow himself the time in which to pursue his investigations in as many of them as he can gain entrance to.

SOME THOUGHTS ON ORIFICIAL SURGERY.

It may be said that Chicago is the birthplace of orificial surgery. Nearly four years ago Prof. E. H. Pratt, of the Chicago Homeopathic college, startled the profession with the assertion that a very large proportion of the chronic cases with which physicians have to contend, those cases that are their *bete noir* in practice, are sufferers from pathological conditions or irritations at some of the orifices of the body. He claimed that it is largely through faulty nerve supply that many morbid conditions are rendered chronic, and that it is through nervous irritations at or very near the orifices that the general nervous system is disturbed. He held that the sympathetic system, the system of animal life, presiding as it does over every function

necessary to human existence, is sometimes seriously disturbed by trifles, and that [an apparently small caustic influence operating in the urethra, in the cervix or in the rectum, may, through reflex action upon the sympathetic, cause profound disorder of the entire system, and he boldly proclaimed, as an axiom, that no persistent or chronic case had been best treated until all orificial irritation had been removed.

Prof. Pratt has extenuated this idea with a religious fervor and has devoted almost his entire time since the promulgation of it to the study of the various principles and problems involved, and it has been my privilege and pleasure to witness his investigations and operations in numbers of cases in which at first sight without examination there appeared to be no reason why orificial irritations should be suspected, and to witness operations in other cases in which cervical or rectal disorder was manifestly the cause of ill-health. To say that I am startled at what I have seen is drawing it very mild, and I do not hesitate to affirm from my experience of one month with Prof. Pratt, that there is a substantial philosophy behind him, and that he is the father of an idea which will eventually find general adoption by the profession. I have seen cases of almost every name and nature, from the mildest form of hypochondria to the most violently insane, improved with wonderful rapidity through orificial work alone. In his private sanitarium Dr. Pratt has several cases of insanity drawn from various insane asylums, some of which have been pronounced incurable, in which improvement is manifest from day to day and from week to week, the treatment being confined to the removal of pockets and papillæ and small hemorrhoids from the rectum and the gradual dilatation of

the sphincter muscles and of the internal os. It is wonderful to witness the soothing effect of the distention of the rectal sphincters with the bivalve speculum, and of how quickly after the seance the mental faculties will be brightened.

In this line alone Dr. Pratt's work is possessed of much merit, but by no means is its application confined to mental affections. As he tersely puts it, there is no chronic disease or condition to which it is not applicable, and with a degree of confidence not attending any other one line of treatment of which I have knowledge he boldly invades the realm of medicine, surgery and gynæcology with his theory of official causation and cure. I am sure the profession will do well to learn of Dr. Pratt, and to acquaint themselves thoroughly with his trusts and practice, for that there is a wide field of application of both in the every day work of a physician there can be no shadow of doubt in the mind of any who have witnessed his treatments and have noted their results.

THE COLLEGE COMMENCEMENTS.

It has been my pleasure to attend the commencement exercises of the Homeopathic Colleges of this city, the first that Chicago Homeopathic on the nineteenth fo and the second that of the Hahnemann College on the twenty-first of the present month. The exercises of both were highly entertaining and were attended by immense audiences. The Chicago Homeopathic graduated fifty-four young men and Hahnemann graduated a mixed class of seventy-eight, eighteen of whom were women. The classes were thoroughly representative and it is safe to predict that of the goodly number of young men and young women who so auspiciously enter upon a career of usefulness and honor a fair per cent. will make a mark for themselves in the profession they have

chosen. It is not amiss in this connection to announce that a number of the graduates of last week will look to the south for fields in which to labor.

It was my good fortune to attend the banquet of the Chicago Homeopathic College, the most delightful affair of the kind I have ever enjoyed. Professor Pratt made a splendid toast master and the responses were hearty, full of wit and of a character to keep the guests in a thorough good humor for two solid hours. Brother Gatchell of the *Era* was the dramatic artist of the occasion and superbly did he play his part. The other speakers were Rev. Dr. Milsted, of the Unitarian church—one of the boys—Professors Mitchell, Foster, Streeter and Bliem, your humble servant and a member of the class whose name is not now remembered.

To one who has been out in the field of practice far above a decade and a half an occasion of this character, recalling as it does the happy hours of by gone college days is refreshing and enjoyable and I am sure THE JOURNAL'S readers who have been there themselves will pardon its mention in a letter of this character.

My next letter will be from New York and in it I will touch briefly upon the homoeopathic department at Ann Arbor, visited this week. C. E. F.

Oil of turpentine is recommended as an effectual deodorizer of iodoform. If iodoform comes in contact with the fingers, these are rubbed with oil of turpentine and washed with soap. Utensils soiled by iodoform can be cleansed in the same manner.—*Texas Courier-Record of Medicine*.

Subscribe for and advertise in THE JOURNAL.

♦ ♦ Surgery ♦ ♦

A Novel Case of Orificial Surgery.

For The Journal:

BY M. J. BLIEM, M. D., CHICAGO.

Would you like to know, "gentle reader," when to use the methods of orificial surgery? Do you ask what its sphere? Listen, while I tell you a tale. I have often heard Professor Pratt say that he recommends its use only when all other known measures have been applied and have failed. Keep it, in fact, sealed under a glass case, to be brought out and used only as a potent dernier resort. Well, now, that is certainly very safe advice to give to a novice, but as one goes farther into the philosophy and experience of orificial surgery he sometimes becomes bold enough to take a short cut and do at once what ought to be done first, but what he has been advised to do last, if his patient lasts that long.

This is a good thing to do, for instance, when your patient cannot give you a year for experiments. Your diagnosis must strike straight at the mark. What a light the guiding star of orificial surgery floods upon an obscure chronic case under such circumstances. To illustrate, as the professors say: While serving as resident surgeon to the Hot Springs in Dakota, last summer, I was called one evening to see a gentleman who was suffering with the most intense pain in his head. The trouble was of a congestive character. He had come in on the morning coach for a few days' rest and had immediately taken a bath. Soon after he was seized with the pains in his head. Under the use of homeopathic remedies and the use, at first, at his insistence, of bromide and chloral, he was able to be about again in four or five days. He was unable to use his head or look down or

stoop for fear of the pain. Unwisely he took another bath. I was sent for in hot haste to come to the bath house, where I found him again in the greatest agony. This attack was more severe than the first and could not be entirely subdued. On getting at his history I found that he had never had such attacks before, but had often had what he called sick headaches, accompanied by vomiting. He had been a journalist, clerk in the house at Washington for many years, and was now general agent for six western states for a London insurance company. He had a great mass of correspondence to attend to. Sometimes he got into such a state that he would have to walk the floor for an hour before he could write a line. His appetite had long been poor, and insomnia was an old bed fellow. In short one of your modern overworked brains. He needed but the exciting cause to produce an active congestion to that brain, to be followed by inflammation or hemorrhage. Under ordinary treatment, of course, I would have urged upon him the necessity for absolute rest for a long time, with proper hygienic care and appropriate medication. But that is advice for rich men. Here, then, was my chance to cure him cito tuto, et jucunde. (The sequel shows that the cure was performed cito and tuto by no means jucunde.) But how that was the question. Where shall I find the key which, if touched, will restore harmony to this disordered frame. In the similia? Yes. I suppose so; but orificial surgery pointed out to me a probable cause, and, you know, the great Hahnemann himself said tolle cansam. So I put before him the prospects. I also told him I believed I could locate the real source of his trouble. When I told him "in the rectum" you should have heard him laugh. In fact I had to laugh myself. "Why," said he,

"I never had any trouble there but two or three times in my life, when I had piles for about twelve hours, and my bowels have always been very regular." But he added that piles were hereditary in his family and a brother had died of them. He permitted an examination which revealed a state of affairs that astonished me. In fact, I told him nothing but a complete extermination of the hemorrhoidal zone with the clamp would do. "Barkis was willin'." Remember, all this time he had this pain in his head and his correspondence accumulating.

From the moment of the operation he never had a pain in his head. But, oh, what a headache in his rectum. The pain now occupied its rightful abode. He improved rapidly and on the eighth day he left for the east. Several months later he appeared in my office in Chicago, weighing twenty pounds heavier than for years, splendid appetite and sleeping well—a very grateful man. That man never hesitated to affirm that I saved his life. Nor do I hesitate to believe that without the knowledge of orificial surgery I could not have restored him to health. Probably he would have recovered from this attack, only to relapse again and again.

Here, then, was a case with no symptoms pointing to the source of irritation. No one not alive to the secrets of orificial irritation would have thought of looking in the rectum for the seat of the difficulty. I do not blame him for laughing for he knew no better. Neither do I, for the same reason, blame you, "gentle reader," if you smile.

The operation performed in this case was the clamp operation as modified by Professor Pratt.

♦ ♦ Legal ♦ ♦

IN printing the laws of Texas regulating the practice of medicine in the last (February) number of *THE JOURNAL* an omission, and a very important one at that, was made in article 398 of the Penal Code, which must be corrected. That article reads: "Art 398. If any person shall hereafter engage in the practice of medicine in any of its branches or departments for pay, or as a regular practitioner, without having first filed for record with the clerk of the district court of the county in which such person may reside, or sojourn, a certificate from some authorized board of medical examiners, or a diploma from some accredited medical college, he shall be punished as prescribed in Art. 396." By comparing this article with the one published, you will see that the words "or a diploma from some accredited medical college" were omitted, which makes quite a difference in the law.

Last month's issue contained the Texas law regulating the practice of medicine in full, less the above omission. No comment whatever was then made on that law.

The reader will observe that the law is divided into two distinct sub-divisions, Articles 3625 up to and including 3638, pages 19 and 20, of *THE JOURNAL*, are what is known as the civil statutes. Then Articles 396, up to and including Art. 399, are of Chapter III. Penal Code.

The province of the civil code is to deal only with actions at law in which arises the classes of litigation known as "Contract" and "Tort" under which heads belong all classes of suits between litigants in civil courts for the rights of property, collection of debts, and for damages to person or property. In other

words it is the law that governs the rights between persons.

The object on the other hand of the penal code is to define crime of all kinds, and to affix the punishment for violations of its provisions; and "it is declared that no person shall be punished for any act or omission, unless the same is made a penal offense and a penalty is affixed thereto by the written law of this state."

"In the construction of this code each general provision shall be controlled by a special provision on the same subject; if there be a conflict."

"Whenever it appears that a provision of the penal law is so indefinitely framed or of such doubtful construction that it cannot be understood, either from the language in which it is expressed, or from some other written law of the state, such penal law shall be regarded as wholly inoperative."

Nor does any law contemplate the doing of that which is impossible of performance. Any such a provision of law is absolutely void.

Taking the above as a groundwork, let us look at the laws, both civil and penal, and compare them.

Civil Statute, Art. 3632. It shall be the duty of said board (board of medical examiners) to examine thoroughly all applicants for certificate of qualification to practice medicine in any of its branches or departments in this state, whether such applicants are furnished with medical diplomas or not. * * * *

By this article an examination of any person, coming into this state and desiring to engage in the practice of medicine is absolutely mandatory; but suppose a person does come into this state and does not go before the board of examiners, in fact is not examined at all and engages in the practice of medicine in spite of the law. Then the question arises, how is

he to be stopped from so doing. How is he to be punished for violating the law. The answer is plain. The punishment can only come by authority of the Penal Code. Now what does it say. In plain English that you must record either a certificate obtained from the board of medical examiners or else "A diploma from some accredited medical college." Failing to do one or the other, then and only then can you be punished as provided in Art. 396.

So that while the civil statute says you must be examined by the board, and pay them fifteen dollars "whether a certificate be granted to such applicant or not" diploma or no diploma, the Penal Code says you can record a diploma or certificate at your option—either one will do. So that there is a very plain conflict between the two laws. Now the question naturally arises which of the laws are to be obeyed? Why the one that can be enforced against you, of course. The civil law cannot work a fine, forfeiture or imprisonment in short can not punish you for violating it. While the Penal Code is enacted for the express purpose of defining crimes and offenses, and affixing the penalties, so that with a diploma you can practice medicine in the state of Texas; all you have to do is to have it from an accredited medical college and have it recorded before you hang out your shingle or begin practice. You do not have to be examined.

Another conflict in these laws will be found between the civil statutes and the Penal Code which is that of the civil statute "Art. 3635, the certificate provided for in the two preceding articles shall, before the person to whom it was granted is entitled to practice by virtue thereof, be recorded in the office of the clerk of the district court," etc.

Now look to the beginning of this arti-

cle and re-read Art. 398, of the Penal Code, which says that you must record your certificate, "or a diploma from some accredited medical college."

Here we find ourselves in this fix, viz.: That there is no provision in the civil statute for recording a diploma, nothing but a certificate can be recorded. The clerk has no authority to record a diploma—then what? Why simply this, the law is faulty and if the law cannot be reconciled how is it to be obeyed. It just cannot be done, and that is the end of it, for no penalties can be inflicted where obedience is prevented or is impossible.

It appears to the writer that the laws were framed by some person, who while he might have been a very good M. D., was not much of a lawyer.

C. H. CLIFFORD.

Protoplasmic Differentiation.

Reason grows with the activity of the individual.

Thought is force generated by protoplasmic cells.

Consciousness is movement of protoplasmic material.

Senses are highly developed and differentiated protoplasmic cells.

The different senses are from the same protoplasm but of different degrees of differentiation.

A muscle is a tissue whose cells are so differentiated as to devote their entire attention to contractility.

A NEW work entitled "Know Thyself: A Study of Man," published by Robert Clark & Co., of Cincinnati, is just out. Prof. J. D. Buck, the author, is one of the closest, most profound students of the age. His insight into the nature of man from years of practical observation, eminently fits him for the position he now occupies in the eyes of all thinkers. The work is an excellent one and it is worth the value of the book to read the preface alone.

Pernicious Anæmia.

Dr. William Hunter has made a study of pernicious anæmia, from which he concludes the following:

(1) Pernicious anæmia is to be regarded as a special disease, both clinically and pathologically. It constitutes a distinct variety of idiopathic anæmia. (2) Its essential pathological feature is an excessive destruction of blood. (3) The most constant anatomical change to be found is the presence of a large excess of iron in the liver. (4) This condition of the liver serves at once to distinguish pernicious anæmia post-mortem from all varieties of symptomatic anæmia, as also from the anæmia resulting from loss of blood. (5) The blood destruction characteristic of this form of anæmia differs both in its nature and in its seats from that found in malaria, in paroxysmal hæmoglobinuria, and other forms of hæmoglobinuria.

Otis Clapp & Son, of Boston, now offers the profession "The College Edition" of Dr. Dake's "Therapeutic Methods." The reliability of the publishers, and the eminent position held by the author of this work should be sufficient recommendation for the work. The book, however, speaks for itself and will find its way into every well regulated library. The student, after he has read the work, wonders how he ever got along without it. The arrangement of subjects is very orderly and as follows: History of Therapeutic Methods and systems. Admitted Prerequisites—Empirical, theoretical, scientific and physiological, therapeutic, chemical, mechanical, antiparasitic, methods and means, antipathic, allopathics, isopathic and homeopathic relationship. The demands of Similia.—Each of these subjects are handled in an intelligent and convincing manner. When you read the work you know what you have read.

♦ ♦ *Materia Medica* ♦ ♦

Dysmenorrhœa.

Cimicifuga rac.—Uterine spasms, pain from side to side across the hypogastrium; persistent sacral back-ache.

Pulsatilla.—Pain not relieved by flow (sepiæ relieved by flow) delayed; flow dark in color; very chilly during menstrual period; flow is scanty; attended by cutting pains in uterine region, abdomen, back and loins; vertigo; loss of appetite, nausea and discharge of thick, black blood alternating with short discharges of bright, red blood; the more severe the pains, the more chilly does the patient become; disposition of the patient is mild and tearful.

Gelsemium.—Congestive and neuralgic form, associated with marked congestion of head; loss of voice during menstrual period; especially where bearing down coexists in these two forms.

Belladonna.—Ushered in with colic; uterine and menstrual colic, this preceded the flow, pain relieved by flow; flow is spasmodic; this drug is especially indicated when the patient is of a plethric habit, sanguine temperament and the disorder has originated from some violent emotion. It follows aconite well.

Ignatia.—Hysteria; pain associated with hysteria; laborlike pain always relieved by pressure; patient lies down; flow dark.

Causticum.—Gripping, clutching pain relieved by doubling up; pain ceases at night but comes on in the morning; previous to menses these pains appear, and are associated with pains in back and limbs.

China.—Too early and too profuse menstruation; pain and quite large clots.

Viburnum.—Those neuralgic forms; uterus exceedingly tender; flow about

normal; constant dragging down pain or heavy ache.

Xanthoxin.—Rheumatic forms; intense pain in right ovary associated with dysmenorrhœa; it has an especial affinity for the covering of the ovary; ovaralgia; flow too early and mostly confined to ovaries.

Provings of Cocaine.

Dr. Percy Wilde, in the British *Monthly Homeopathic Review*, for January, publishes a collection of symptoms, the result of provings and observations of cases of poisoning by cocaine, from which we excerpt the following:

Mouth and Throat.—Intense salivation (following local application). Dryness of the mouth and throat (after internal administration). Loss of power in the tongue. Spasm of abductor muscles (local application). Weakness and thickness of the voice.

Nervous System.—Giddiness (primary), sometimes accompanied by restlessness and supra-orbital headache, followed by excitement, which may pass into unconsciousness. Patients could not be roused by shouting. Hallucination or mania (in a few cases only). Sometimes the semi-consciousness of cerebral anæmia. The patient lay as if asleep, talking as if in delirium (one case). Immediate sleep followed a dose of 22 grains. Agonizing pain along the spine, especially in the lumbar region. Complete inability to move the limbs. Twitching and convulsive movements of muscles. Tetanic spasm of muscles. Experiments on dogs (Zanchevski) showed great weakness of the legs, the animal remaining in a sitting posture. Post-mortem examination in cases of chronic poisoning showed albuminoid degeneration, especially marked in the ganglionic cells of the spinal cord and cardiac ganglia, and less

marked in the ganglionic cells of the medulla oblongata. There was also a fatty degeneration of the muscular tissue.

Eyes. — Sensibility of conjunctiva absent after internal use only. Pupils normal, veins of retina normal, arteries rather thinner and paler than usual. Papilla of optic nerve of normal fulness. Local application to the eyes produces two classes of lesions. In the first, the changes chiefly affect the epithelial layer; in the second, there is opacity of the true corneal substance. Epithelial desquamation in rabbits. Internal administration frequently produces dilatation of pupils and almost complete amaurosis.

Stomach and Liver. — Tendency to vomit, but efforts are useless, only the movements of retching are produced. Recurring vomiting, lasting two or three days. Cramp in stomach. Atrophy of the hepatic cells observed in dogs after chronic poisoning. Severe abdominal pains after a very large dose.

Skin. — A rash about the body, especially affecting the neck, and resembling scarlatina. Sweating. Numbness of the skin when locally applied. Blanching of the skin. Coldness of the extremities.

Respiration. — Sometimes unaffected. Cyanosis. Paroxysmal dyspnoea (probably cardiac). In animals, increased frequency of respiration (for about a quarter of an hour). Two hours after 10 grains had been taken hypodermically by a drunken man, the respirations were only 9 per minute and stertorous. Convulsive respirations. Breathing irregular, very hurried, but deep and full.

Circulation. — There is first excitement of the heart, followed by weak action; often intermittent palpitation; faintness and dyspnoea. Post-mortem examination showed the changes noted under the nervous system, and cellular proliferation

and hyaline degeneration of the coats of the blood vessels in the spinal cord.

Urine. — Suppression of urine for twenty-four hours followed a dose of 22 grains. — *Hahnemannian Monthly.*

Morning Diarrhoea.

JAMES BUTCHART, M. D., CLINTON, ONT.

The following symptoms were arranged from Farrington in my study of a case of diarrhoea in the morning :

Sulphur is the first to be thought of in chronic cases, Stool changes frequently in color, yellow, slimy or watery. In scrofulous children food may be undigested. Diarrhoea worse in morning, driving patient from bed in a hurry, soreness and rawness with a red line about the anus.

Natrum sulph. diarrhoea comes on regularly every morning, returning each day regularly, comes more in forenoon after getting up, thus differing from sulphur, which hurries out of bed. In old scrofulous cases, and the hydrogenoid constitution of Grauvogl and the sycotic of Hahnemann. Associated with much flatus, belching after eating, eructations tasteless or sour, rumbling of wind in bowels on right side in ascending colon, subacute pain in illeo-cæcal valve. [Compare *Alcæ.*]

Rumex crispus hurries patient out of bed (same as sulphur,) but is distinguished from sulphur by being associated with catarrhs and the characteristic cough of *rumex*.

Podophyllum also rubs against sulphur in morning stool, pouring out like water from a hydrant, hurries patient out of bed, stool changing in color. Differs from sulphur in that it continues all day and is apt to be worse at noon. It has soreness and rawness of anus. Stool may be preceded by retching and vomiting, and comes with a gush, and though large quantity soon returns, but does not much

exhaust patient. May contain undigested food, and in children often deposits a mealy sediment. Is associated with prolapsus recti at each stool, especially in morning, and also with prolapsus uteri with bearing down and numbness in left ovary extending down thigh, and much backache.

Phosphorus has constipation with characteristic "dog stool" or diarrhoea, profuse, watery or green, worse in morning, also a stool of green mucus, worse in evening. Apt to contain undigested food; are very debilitating. Anus seems to stand open and exudes moisture.

Bryonia.—Usually constipation; attacked by diarrhoea from indulgence in vegetable food, stewed fruits, and getting over-heated in summer. Worse in morning as soon as he moves after rising. Sometimes seized with sudden griping doubling pains, copious pasty stools, sometimes dark green from bile. They have the odor of old cheese.

Nux vom.—Usually worse in morning, stools papescent and watery, scanty and urging, retching and vomiting in morning, after a debauch, craving liquor. In dysentery, stools bloody and slimy, also watery or scanty. Urging which ceases as soon as bowels move. Result of cold or checked perspiration.

Lilium tig.—Urging to stool, morning diarrhoea, hurrying out of bed; stool yellow, papescent, causing an excoriated feeling at anus. Lilium symptoms are usually worse in afternoon. Associated with leucorrhoea and its peculiar uterine symptoms.

Dioscorea.—Morning diarrhoea, griping colicky pains, apt to fly off to other parts, much the same as colocynth.

Kali bich.—Constipation or else morning diarrhoea; watery stools followed by tenesmus. Aggravated by beer or ale.

Petroleum.—Stools watery, often un-

digested, comes early in morning, associated with emaciation of body. Differs from sulphur in coming also during the day. Diarrhoea from the use of cabbage.

Gnaphalium. — Watery, offensive, morning diarrhoea, repeating during day. Successfully used in cholera infantum.

Nuphar luteum.—Yellow diarrhoea, worse in morning, causes nervous weakness, has been employed during typhoid. —*Medical Advance.*

Cardiac Distress--Kalmia.

F. H., 33 years old, wholesale merchant, Copenhagen. Treatment commenced September 18, 1883. Has been sick for the last six years, and has, by his allopathic physicians, been treated for ulcer in stomach; prescription was milk, wheat bread, and he was to keep his bed. Then he, after having kept his bed six to eight weeks, got up a little, but was, as his state always was poor, compelled to go to bed again after a short time; and so it went on. He complains of severe pressing in the direction of the stomach, especially after eating rye bread or potatoes. Nauseous taste in the mouth, heaviness in the forehead over the eyes, sleepiness after meals, puffiness in the lower region of the stomach, asthma, cardialgia. Motions of the bowels, often thin, yet formed and yellow. The tongue white-coated along the sides. He is depressed and irritable. Urine normal. Lungs normal. The heart sounds towards the lowest point metallic, and often irregular. He took, according to the different indications, nux vom. 3, sulphur 30, calcar. carb. 12, phosphor. 6, pulsatilla 3, arsenicum alb. 3, and all symptoms of pains in the stomach disappeared. In March, 1884, he complained of oppression on the inner side of the sternum, about the middle, especially mornings and evenings, and when in

motion (stooping). Palpitation of the heart and fear, yet the pulse is regular. The heart-beat somewhat grating. He is well in other respects. Bryonia, arnica, spigelia, and iod., besides several others, have been given, but without alteration. Pressing across the chest worse.

In the beginning of October he gave the following statement :

Pressing on the inner side of the sternum and in the region of the stomach ; he feels better when sitting up, and then it is as if something is pressed away from the sternum. Prescription : *Kalmia latifolia*. 2, three drops three times a day, and he was quite well in about a fortnight. Has never since felt any of the above named pains. [Journal IV., 1797.]
—*Homeopathic World*.

Gynecological Notes.

Pains.—Pain in left iliac region may be caused by chronic constipation, the left ovarian vein being pressed upon by an accumulation of feces in the sigmoid flexure.

Hemicrania may be caused by inflammation of one of the ovaries.

'Pain in the lumbar or sacral regions may be independent of pelvis.

Supra-pubic, direct pain to bladder.

Diffuse abdominal pain suggests growths in the abdomen.

Pain in the chest may come from genitals.

Shooting pains in the chest may result from pregnancy or the menses.

Pain in the stomach may be caused by uterus.

Pain is the cry of a sick organ.

Never employ force in an instrumental examination.

Never manipulate the uterus when rectum and bladder are full.

On the subject of local treatment of organic diseases of the uterus there is no doubt less harmony of thought and opinion in the practice of gynecology than of the treatment of disease in any other part of the body. Owing to the intimate relation existing between diseases found within the pelvis and general functional disturbances, there must necessarily exist more or less confusion of ideas regarding the subject of local treatment, as they are under control of constitutional medication. To establish, therefore, a rational system of topical treatment to the uterus there must first be a clear comprehension of the precise nature of the malady and a judicious application of the agent employed. There is no practice so susceptible of charlatanism, so open to undue pretensions on the part of the practitioner as gynecological practice.—*Phil. Parker, M. D.*

In the examination of a patient suspected of having uterine disorders no direct or suggestive questions should be asked, but the symptoms should be drawn forth by encouraging and properly directing her narrative of her case. "Certain signs, which we call 'rational' from their appealing to our reason and not to our senses, such as pain in the head, back and limbs, menstrual disorder, leucorrhœa, impeded locomotion, derangement of the digestion, and nervous manifestations, will lead us to suspect the genital organs and may even convince us of the existence of disease there. Generally, however, they result in the adoption of other and more certain means of diagnosis, which are termed 'physical.' "

Nerve tissues are the highest order of protoplasmic differentiation, and control the entire mechanism of the body, etc.

Our Louisville Letter.

March 11, 1889.

My Dear Dr. Clifford:—

It was not long after our friend Fisher gave a final puerperal groan and the small "Kid" "The Homeopathic Pellet" was launched upon the troublous sea of life that I became acquainted with both the kid and his proud parent.

He was not a very promising little kuss, just a little 4-by-6-er without much to say and seemingly not destined to make as much fuss in the world as the average youngster.

Some of us who early contemplated his proportions thought that this puny puerperal product of the proud Fisher would die a bornin', "others a teething and the most sanguine of us were certain that diseases, either dental or incidental to childhood, would consign him to an early grave."

But we didn't know his pa then, and hence had little idea what vital tenacity he got by right of inheritance.

Time went on and the little fellow grew larger and larger and spread out from a pellet to an adult pill, and then with the further lapse of time, and in the wild exuberant heyday of youth—as Amelie Rives might say—changed his name into the high sounding comprehensive and ambitious title "THE SOUTHERN JOURNAL OF HOMEOPATHY," and when he grew to be bigger and fatter and brighter and crisper and more independent and self assertive, in short more like his papa, every month all the boys around through the states begun to take a fatherly interest in him, too, and concluded that if they didn't put in a card and send an article now and then they couldn't stay "in the swim" so to speak.

And as though all this was not enough, when the representative society of

Homeopathy for the whole south had to acknowledge the "Kid" as its principal organizer, and did the handsome thing by making it their official mouthpiece, and when state societies one after the other begun to follow suit, and when at last to cap the climax Fisher announced that this same "Kid" was not only taking care of himself, but was beginning to do something towards the support of the "old man."

When all these things had happened and in an incredibly short time, and men realized that the SOUTHERN JOURNAL had done more for southern homeopathy than any one agency for years, for one, my sensations were much mixed when in the December No. Fisher announced that he was going to take his blooming progeny to the Pacific coast with him, away from his old friends and pulling him up by the roots transplant him upon an uncongenial soil amongst strangers. Right there I came within one (as near as most women come to having twins) of writing to him and telling him in my most reckless and abandoned style that he was a mean thing, so there now! That after Green and Sherbino and Jones and Crutcher and Cohen and Orme and Eckford and Bailey and "Yours Truly," and others perhaps more gifted, but lazier or less scribblesome, or more modest or something had had such a big hand in the support and tuelage of the younster it would be an awful injustice as well as a dreadful yank to our chordæ tendinæ if we should have to part with him so soon. Hence you may imagine the heartfelt prayer that went up from us all when we found that the "Kid," now the vigorous adult, was to be adopted by no less a person than yourself, and would stay with us all as long as we contributed properly to his support in dollars and dissertations.

I even confess that in the silence of my

back office I dropped a tiny tear of gratitude.

I do not hesitate to say for all these men who stood so nobly beside Fisher, "We'll stand by you to a man," and you will not be allowed to suffer for this courageous stand. Fisher's followers in this fight for the supremacy of southern homeopathy are men true and tried; they mean business, and will be on hand until all the returns are in from the most remote districts.

We all love Fisher and realize his true worth, and feel his loss keenly, but it would be painful to him to find that the removal of any one man could clog the wheels of progress for southern homeopathy.

THE SOUTHERN JOURNAL must and shall live, and the men who have stood by it in the past are certain to see the logic of the situation and to find that their personal interests and the well being of southern homeopathy demand that they do not withhold their future support.

What has THE SOUTHERN JOURNAL OF HOMEOPATHY done for our section?

First—It has developed latent writing talent of a high order.

Second—It has given to American homeopathy a journal that stands neck and neck with the best medical periodicals of the United States, and is quoted and read with the best of them.

Third—It has organized and fostered the Southern Homeopathic association and made it the power that it is.

Fourth—It has expedited the formation of state societies in the south and hastened their growth.

Fifth—It has given an impetus that nothing else could have done to the discussion of southern diseases and their homeopathic treatment, notably yellow fever.

Sixth—It has advertised homeopathy in the south and advertised the south as a field for homeopathic practitioners as could have been done in no other way.

These are some of the things it has done, but not all by any means, and what it has done is but as an oasis in a desert to what under proper conditions it is capable of doing in the future, considering the area and population and the cumulative material increase in population, wealth and prosperity of the section of which it is the only homeopathic mouthpiece, for at this day the press is the lever that moves the world, and printers' ink is the grand agency for the dissemination of knowledge, beside which all others combined cannot tempt a comparison.

Some one has said that the three essentials to success in the ministry are "grace, grit and gumption." The general make-up of your first number, with the smiling "phiz." of Fisher at the portals as though inviting the reader to the good things beyond, give proof to your colleagues that you possess the three "G's" in an eminent degree, so accept my congratulations and attribute the length of my letter to the importance of the subject handled.

Yours sincerely and confidently,

A. L. MONROE.

VOLUME vii of "Reference Handbook of the Medical Sciences," by Wm. Wood & Co., of Nos. 56 & 58 Lafayette Place, New York, is now out. One more volume will finish this series. The work embraces scientific and practical medicine and allied science by the best writers of the day. It is illustrated by chromolithographs and fine wood engravings. The series is an entire medical library within itself and ought to be in the hands of every practitioner.

For The Southern Journal.

Eupatorium Perfoliatum.

There was a time when I believed that a simon-pure case of chills and fever could not be cured by anything but the Peruvian bark or one of its salts in crude and material doses. 'Tis true, I at times exhibited arsenicum in the lower potencies, but more often Fowler's sol., and other divers make-shifts, but my homeopathic brethren throughout the land must not lay this up against my individual person, for I was neither wilful nor stupid, but followed the directions of some of my *professional* homeopathic (?) preceptors. By *special favor* I at times received private hints and secret directions *how* and *when* to prescribe quinine and with what other necessary (?) ingredients to mix it to out-quinine and thus out-cure (?) my allopathic rivals, that were to be. Struggling against the strong tide of these methods for years, I still found myself helpless, stranded, as it were, on the quinine rocks, until kindly Texas hands and hearts and *brains* showed me a better way. These Texas friends were re-enforced by quite a number of stranger-friends in the east, and I thank them every day of my life that they have taught me the homeopathy of Hahnemann, and saved me from eclecticism, if not from allopathy. I have not the power to repay these gentlemen for their disinterestedness, but will attempt to prove myself worthy of their confidence by diffusing the light of their understanding, now so happily, at least partially my own, by my work. This brings us to the subject under consideration. In the early days of the past autumn, as chills and fever became a prevalent condition, I was oft-times puzzled to prescribe, even after the closest analysis of a case, finding such close analogy between *nux. vom.*, *nat. mur.*,

arsen., and *eup. perf.*, that it was difficult to prescribe correctly, if I attempted to prescribe at once. I do not mean to say that all symptoms of these drugs so closely resemble one another, that differentiation is next to impossible, but many symptoms do; and when undertaking an analysis, according to the best known methods, one discovers that though many symptoms are dissimilar but still that the sum total of symptoms under each drug foots up the same, then one becomes puzzled. In searching for the most prominent and uncommon symptoms (see *Organon*) we are again met by a number peculiar to each drug and are again at sea. Then close study, wide comparison and judicious discrimination is left us. Even these have failed me, or rather I have failed, though utilizing every expedient known to me in research. Then I would prescribe what I thought was the nearest (?) *similimum*. If it proved to be the "similar" drug, it would always cure my case; if it was not, it would invariably clear up the case, so that by a re-examination of symptoms on the patient's return, the *similimum* could be easily developed. After several center shots and some errors, I discovered that *eupatorium perf.* demonstrated its right to be nominated the *similimum* of at least eight cases out of ten; that, in fact, it was the "*genus epidemicus*," and I have used it with unvarying success for several months—three times within the past week (first week in March)—with brilliant effect. The last case prescribed for is here detailed:

Mary B., 11 years old; fair complexion, blue eyes and light hair. Chills for two weeks. Chill always comes on between 8 and 9 o'clock in the morning. Every bone in the body aches, and head begins to ache during chill.

Very thirsty before and during chill. Vomiting of water and bile just before fever rises. Slight perspiration only on forehead, which dries up immediately.

These symptoms were all I cared to elicit, as they were all sufficient. The case, as far as noted, presented the most complete picture of eup. perf. I have seen this season. The picture of eup. frequently varies. Often there is vomiting throughout the chilly stage, and of food, if there be any in the stomach; also vomiting of the water that is drunk. Usually there is no sweat, or at least the patient says so. The time of an attack cannot be taken into consideration, though exactitude in this respect tends to emphasize the other symptoms. The eup. perf. chill sometimes puts your discriminative powers to the test by appearing between 10 and 11 o'clock a. m., thus simulating nat. mur. first, and nux. vom. next. Then again it makes a call at 11 a. m., at noon, or between 1 and 3 o'clock, and even later in the day—I had one case that had two attacks a day—and it or any other drug will lead you a merry chase if you place too much stress upon the time. Once you become well acquainted with the characteristics of eup.—and this holds good with every drug in the mat. med., of course—you will never mistake it. Now, I beg of you, do not give eup. perf. for the first case of ague that enters your office door and for every one thereafter, except you observe the peculiar features of the drug, or you will say "this homeopathic 'splitting of hairs' is all bosh, and I'll give the fellow something like this:

R

Cinchona Sulph. grs. xx

Caps. annum. " x

Podophyl " vi

M et ft. Caps. No. 4.

S.—One capsule every two hours

or substitute Dover's powders for the podoph., if the patient happens to have diarrhoea."

Yes, I've been all along there, thanks to my early homeopathic (?) teaching. And now that great disturbing element, the potency question, is brought to the surface. You wish to know in what form I gave the remedy. I have only one preparation of eup. perf. at my command (having made a friendly eclectic a gift of my bottle of the tincture), and that was originally Carrol Dunham's 200th. Had I a reliable higher potency—and I will have, having purchased a portion of the original Lippe potencies, thus demonstrating my fullest confidence in the single remedy, the similar remedy, and in the smallest quantity, if thoroughly potentized—yes, had I a reliable higher potency I would not hesitate to use it, as I shall, after the Lippe stock arrives. I have observed, as no doubt have many others, that when a patient calls for treatment in a case of ague, and informs one that his chills come every two or three weeks, that he has invariably been dosed with quinine. Such a condition, of course, complicates affairs, but yet the similimum is often prominently presented. In badly mixed cases we have quinine-produced symptoms, and in bold relief the symptoms of yet another drug, often nat. mur., arsen. or ipecac. In such cases that other drug—the one so prominently showing itself over and above the quinine symptoms—will prove the antidote of the quinine: rid the patient of his chinium provings, and unfold a new list of symptoms from which you may at once prescribe the similimum. Why this is so, I will not attempt to explain, but that it is so, my personal experience has conclusively proven.

S. W. COHEN, Waco, Tex.

A Note on Eupatorium Perf.

We make mistakes sometimes in prescribing by rejecting a remedy, because some of its characteristic symptoms are not among those elicited from the patient. For example the cold feet of calcarea, the hot soles of sulphur, the red sand in the urine of lycopodium, etc. These remedies are frequently indicated without these symptoms being present, and even if they are not indicated unless they cover the totality of the symptoms. I will illustrate the point by the following case of intermittent fever.

Mr. T. M. chill at 5 p. m.; hard shakings, wants to sit close by fire, great thirst during the chill, some thirst during the fever, sleep during fever, hydroa (fever blisters) on lips after the fever. Being very busy at the time, and having several serious cases on hand I prescribed nat. mur. because it covered the totality of the symptoms gleaned from the patient. Two days after chill at 3:30 p. m., chill harder, and lasted longer, and fever of greater duration. More fever blisters. nat. m. cm. one dose in the apyrexia. On the third day chill again returned at 2 p. m., and was in every way severer than before. Fortunately I happened to be present during the chill. I was now thoroughly convinced that nat. mur. was not the remedy, and prepared pencil and note book in hand, to properly "take the case."

The symptoms now were as follows: Before the chill: much thirst, Alston, amm-m, ang., arn., ars., bor., bry., cimex, cina., cinch, eup. perf, lach, lob, puls, samb. sulph.

— — — yawning, aesc. amt. t. arn, ars. elat., erup. perf, cinch, ign. Ipec. nat-m. nuxv. rhus.

Chill commences in the hands? Chel. dig. eup. perf. gels nuxv. rhus. sabad sulph.

Chills, (shivering) commence in forehead run back over the head and down the back. Chills running down the back: Apis. eup. perf, eup. purp, and others not related to the general state.

Chilliness in the head; Nux sulph, arn, caps, meny, calc.

During the chill:

— — — thirst, amm-m, apis, arn; ars. bry. caps. cinch. eup. perf, eup. purp, lach, nat-m, nux-v, rhus and others.

— — — heat of head: Ant-c, arn, arsen, bry, cinch, eup. purp, gels, nuxv, rhus and others.

— — — heat of feet: Arsen, calc-c, lyc. puls. sulph. eup. perf.

— — — violent shaking with little coldness: Eup. perf; eup. purp.

— — — Yawning: Ars. bry. caps, eup. perf, lyc, nat-m. meny.

During the heat:

— — — thirst. Alston, amm-m. apis. arn. ars. bry. calc. cinch. eup. perf, eup. purp. lach. lyc. nat-m, nuxv. rhus. sulph. and others.

— — — sleep. Apis, cinch. eup. perf. gels. lach, lyc. natm. rhus.

— — — shiverings. Apis, arn. calc. cinch. eup. perf, gels, lach. meny. nuxv, rhus. sulph.

During the sweat:

— — — headache. Arn. eup. perf. natm. rhus.

— — — thirst wantings. Apis. calc. caps. eup. perf. nuxv.

During apyrexia:

— — — Eruption on lips (fever blistered), antc. arsen. bry. calc-c. caust. hep. ign. ipec. lycop. lac-can, natm. nuxv. rhus. sep. sil.

— — — languor, lassitude, apis, arn. ars. cinch. eup. perf. eup. purp. gels. lyc. natm. nuxv. sulph.

Eupat. perf. covered all the symptoms, but the shiverings on the head and the fever sores.

As the coldness was greater on the back than on the head, I did not consider this essential. It may be the future will confirm this as a [clinical symptom. As for the fever blisters I have frequently cured chills where this was a concomitant symptom, and consider it as characteristic of this remedy as of *nuxvom*; eup. perf. was therefore prescribed one dose after the sweat, at the commencement of the apyrexia. Two days after, chill returned one and one-half hours later. Chill this time did not amount to a shake, and lasted only one half hour instead of one and a-half hours as before. Duration of fever shorter.

Gave *sac lac* a dose every two hours charging patient it must be taken through the night. No more chills.

In this case there was none of the aching so characteristic of *eupatorium*, and the vomiting at the conclusion of the chill was also absent. The characteristic and peculiar symptoms belonged to eup. perf. more than to any other remedy, and therefore one dose of the minimum size was sufficient to cure.

H. C. MORROW, M. D.

The German Treatment of Obesity.

In the *Nineteenth Century* Dr. Burney Yeo discusses the treatment of obesity, according to the plans of Schweningen and Oertel, which is at present very popular, especially in the German Empire. The objects aimed at are the following:

1. To improve the muscular tone of the heart.
2. To maintain the normal composition of the blood.
3. To regulate the quantity of fluid in the body.
4. To prevent the deposit of fat.

These objects are attained by the following means:

1. The muscle of the heart is strength-

ened by enforced exercise, such as climbing heights. This requires great care, and the exercises must be graded, the amount of work being increased as the patient can bear it.

2. To preserve the normal composition of the blood the food should be chiefly albuminous. It may consist of the lean of roast or boiled beef, veal, mutton, game and eggs. Green vegetables (as cabbage or spinach) may be taken; fat and carbo-hydrates only in very limited quantities; from four to six ounces of bread per diem.

3. To regulate the quantity of fluid in the body the amount of fluid drunk daily must be limited. One cup (rather less than six ounces) of coffee, tea or milk morning and evening, and about twelve ounces of wine, and from eight to sixteen ounces of water shall comprise all the fluid consumed in twenty-four hours. Beer is entirely forbidden. The discharge of fluid from the body is promoted by active exercise, and occasionally by a course of baths, with packing.

4. To prevent the deposit of fat, the principles of diet already set forth must be carried into practice as follows:

Morning.—One cup of tea or coffee, with a little milk, altogether about six ounces; bread about three ounces.

Noon.—Three or four ounces of soup, seven or eight ounces of roast or boiled beef, veal, game, salad or lighter vegetable, a little fish (cooked without fat) if desired, one ounce of bread or fairinaceous pudding (never more than three ounces), three or six ounces of fruit, fresh preferred, for desert. It is desirable at this meal to avoid taking fluids, but in hot weather, or in the absence of fruits, six or eight ounces of light wine may be taken.

Afternoon.—The same amount of coffee or tea as in the morning, with, at most,

six ounces of water; an ounce of bread as an exceptional indulgence.

Evening.—One or two soft-boiled eggs, an ounce of bread, perhaps a small slice of cheese. Salad and fruit, six or eight ounces of wine, with four to five ounces of water.

Partiality.

ST. AUGUSTINE, FLA., March, 1889.

DOCTOR EDITOR :—I was surprised recently while in attendance upon a convention of homeopathic physicians of Florida at Jacksonville, to learn of the manner in which the physicians of our school and their patrons were treated (or mistreated) during the prevalence of the yellow fever epidemic there last summer, by those having control of the generous benefactions lavished upon that city at that time.

It is well known that many thousands of dollars in money and supplies of various kinds were collected all through the country, but especially in the north, in "aid of the yellow fever sufferers of Florida," and poured into Jacksonville with unstinted hand.

These munificent charities were placed in the hands of a special committee of the Citizens' Auxiliary Association for distribution in furnishing supplies provisions, etc., to the needy, and to employ physicians and nurses for the sick.

No complaint has reached us of partiality or special favoritism except in the employment of physicians. Only "regulars" were employed, and only "regulars" were paid by the committee. Not even our resident homeopathic physicians of the place were allowed to work under the auspices of the committee, much less others outside (like myself) who volunteered to aid them.

Can we not all appreciate the feelings of those skillful, painstaking, patient

workers, Doctors Stout and the two Johnsons, father and son, when after the pestilence had subsided, they presented bills to patients whom they had treated, to be told, "you must" or "you should get your pay from the committee?"

Those Jacksonville homeopathic physicians are noble, heroic fellows, and are not "made of the stuff" which complains, but "for all of that" they, and all of us of the south, are entitled to certain rights and should maintain them on all occasions.

Patrons of homeopathy are proverbially intelligent, liberal and generous, and doubtless contributed a large proportion of those benefactions showered upon our sister city last summer, with the expectation that at least "all would share, and share alike." Now, therefore, let us "pass the word around" and in the future, should there be occasion, let us see that there be a commission of homeopaths organized, with a committee in the infected district, and ask our friends to place their contributions with this commission, that it may be applied where it will do the most good, which cannot be otherwise than in the application of homeopathic methods to the treatment of sickness. Fraternally,

S. MILLS FOWLER, M. D.

The Use of the Forceps.

Dr. Paul F. Munde, of New York City, in response to special request, sends us his opinion regarding "The Use of the Forceps. Their influence for Good as Well as for Injury to the Parturient Woman." He says:

"I have always considered the obstetric forceps one of the most useful and beneficial instruments in our armamentarium, one which, in skillful hands, and with proper care and judgment, can never do harm either to mother or child, but

will often be the only means of saving the life of one or the other, or both, or of sparing the mother the consequences of delayed delivery and excessive pressure of the soft parts.

"Injury to the mother by the forceps is usually due to their early application, before the cervix is well dilated, or to the use of excessive or misdirected force in making traction. A cervix may, but need not, be torn by the forceps. A perineum should never be injured by forceps; indeed, the gentle and dextrous guiding of the head over the perineum, so as to permit its gradual distention, is one of the means of preventing that injury. Too much haste in delivering the head with the forceps, is the usual cause of a laceration of the perineum in instrumental delivery.

"Abuse of the forceps, in my opinion, consists in applying them merely to terminate the labor for the sake of the medical attendant; or, when the soft parts are as yet unprepared, or the head is too high, or the pelvis is too narrow.

"The correct indications for the use of the forceps are perfectly clear to a well educated and evenly balanced, conscientious accoucheur. His own convenience certainly should not be an indication for their use. But, if he knows his skill to be equal to the case, and feels that he can safely deliver the woman with forceps, he should not hesitate, the conditions being favorable to their use and the labor making no progress, to use them after waiting a reasonable time (say two or three hours, without any progress whatever), and thus save the mother unnecessary suffering.

"In short, I think that more harm has been done by too long delay in applying the forceps, and by their unskillful, rude use, than by their too frequent application by skillful hands.

"As for the Tarnier forceps, I confess

never to have used them, although I think the principle a correct one, and one which is calculated to save the obstetrician's strength. Their employment is naturally restricted, more or less, to a high position of the head, chiefly in primiparæ. I have found a Simpson's forceps, with Elliot's screw in the handle to prevent too great compression of the head, perfectly sufficient in my practice, which obstetrically, is now entirely a consulting one.

"In conclusion, I would say that a slight indentation or abrasion, of the child's head by the forceps blades cannot always be avoided, particularly in high cases, and such an occurrence should not be considered necessarily as an abuse or unskillful use of the instrument.

"Of course this subject can be continued indefinitely. I hope I have answered your question with sufficient clearness to suit your purpose."—*The Weekly Medical Review*.

Mixed Anæsthesia.

Obalinski, of Cracow, speaks highly of anæsthesia induced by a combination of chloroform and cocaine. He maintains that when anæsthesia is induced by chloroform it can be kept up by administration of cocaine. The following is the method followed: After giving chloroform for a few minutes, until commencing general anæsthesia is noticed, a quantity of cocaine, varying from three-fourths to one grain, is injected into the tissues that are to be operated on. After the injection of the cocaine, no further chloroform is administered. After this method of anæsthesia, such operations as amputation of the leg and thigh, and herniotomy, have been performed. It is claimed for this mixed anæsthesia that that it is less dangerous than either pure chloroform or a mixture of chloroform and ether. Obalinski followed the above method in twenty-four cases, and always with satisfactory results.—*Montreal Med. Journal*.

Reunion of Pulte's Alumni at the
Gibson House, March 15.

Music.....Male Quartette
Toastmaster.....Dr. A. L. McCormick

"Here's to the maiden of bashful fifteen;
Here's to the widow of fifty;
Here's to the flaunting extravagant queen;
And here's to the housewife that's thrifty.

Let the toast pass,
Drink to the lass,
I'll warrant she'll prove an excuse for the
glass."
—*Sheridan*.

Welcome.....Prof. C. E. Walton

"Learn'd he was in med'c'nal lore,
For by his side a pouch he wore,
Replete with strong hermetic powder
That wounds nine moles point-blank would
solder."
—*Butler*.

Music.....O. W. Lounsbury, J.
MENU.

Oration.....Dr. D. V. Summers

"Doubt not, my lord; I'll play the orator,
As if the golden fee, for which I plead,
Were for myself."
—*Shakespeare*.

Music.....Male Quartette
The Alumni.....Dr. W. T. Partridge

"Within the infant rind of this small flower,
Poison hath residence and medicine power."
—*Shakespeare*.

Bachelors of Medicine...Dr. W. A. Geohagan
"When taken,
To be well shaken."
—*Colman*.

The Occasion.....Dr. S. R. Geiser

"Is there no hope?" the sick man said.
The silent doctor shook his head,
And took his leave with signs of sorrow,
Despairing of his fee to-morrow."
—*Gay*.

Music.....Geo. W. Miller
The Wraith.....Dr. W. C. Niebling

"Nature, too unkind
That made no medicine for a troubled mind."
—*Beaumont & Fletcher*.

Class of '89.....Dr. Chas. Butchart

"By medicine life may be prolonged, yet death
Will seize the doctor too."
—*Shakespeare*.

Farewell—The Faculty.....Prof. J. D. Buck

"Come, O Ukko, to my rescue,
God of mercy, lend thy presence,
Give these vapor-baths new virtues,
Grant to them the power of healing,
And restore my dying people,
Drive away these fell diseases."

—*Kalevala*.

A glance over the programme shows careful study on the part of the arrangement committee to make a success of the gathering. It is with regret that we are absent from it in propria persona, yet in spirit we are in their midst.

The arm chair is now tilted back and in fancy's dream we hear the well remembered sonorous voice of Prof. Walton, as he welcomes those who erst while sat upon the hard chairs of the amphitheatre and listened to his instructions on minor surgical appliances, and whom he often "treed" in the quiz. We seem to hear the pleasing eloquence of our former room-mate and close competitor for the faculty medal, as he delivers the oration of the evening. We seem to look upon the whole scene as it passes before us with a tender yearning to be there, to once more grasp in a united welcome of fraternal greeting the hands so warmly pressed at our last parting.

We almost seem to feel the influences of the "Ukko" as he bids farewell to his departing children, whom he has so well taught how to guide their footsteps through the shifting sands of life's pathway, to heal the sick, help those in distress and upon whom he now pronounces his last and lasting benediction.

Verily, Pulto, thou art our mother of knowledge, to thee and thine our feelings go out in gratitude for all thou hast done for us; may the time soon come when we shall meet again.

"A COUNTRY'S greatest need is mothers."

SOCIETIES.

SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION.

MEMPHIS, Tenn., March 15.

Dear Dr. Clifford:—

After congratulating the profession at large, and the southern members in particular, upon the new lease of life now vouchsafed THE SOUTHERN JOURNAL OF HOMEOPATHY, I deem it a fitting time to remind the workers of our school that the preliminaries of the Memphis meeting are already arranged. Let us keep this fact well in mind, and everybody work for the success of the November gathering.

I hope to be able to issue a circular some time in July, giving a tolerably clear idea of the work to be done at the fall meeting. Volunteer papers from our friends of the north will be cordially welcomed.

Just here I venture a suggestion. The people and the press of Memphis will treat us with great cordiality. The city has for years been battling with various sanitary problems, and all papers which will throw light upon sanitation in any of its phases will be especially appreciated by the public and will unquestionably do homeopathy great good in the minds of thinking people. It is expected that Drs. Holcombe, Bailey, Staut and others will give us papers upon yellow fever—a subject which above all others will interest the people of Memphis.

The head of the Bureau of Gynecology Dr. Sarah J. Millsop, of Bowling Green, Ky., is visiting Memphis this week. She reports that her department will be fully represented at the coming meeting; that able papers from the east and other sections are promised, and that visitors from Chicago and Cincinnati are sure to come. The north came down to Louisville last October and made our meeting

a great success. We are more grateful than we know how to express, and we hereby extend another welcome to the entire country.

I shall appreciate a prompt response to all letters and circulars. Advice will be gratefully received. We of Memphis are not strong in numbers, but we are mighty determined in spirit. Help us all you can. Fraternally,

HOWARD CRUTCHER,
Corresponding Secretary.

THE WESTERN EXCHANGE BUREAU.

Physician's, dentist's and druggist's locations bought and sold. Assistants, substitutes and partners furnished. Send two cent stamp for the Monthly Bulletin. Sample copy of the *Medical News* free. Address, H. A. Mumaw, M. D., Orrville, Ohio.

There is a great deal in knowing what not to do in the treatment of disease, as is well illustrated in a case reported by Dr. Shaw in the *Canada Lancel*. The patient, a young man, had had "weak eyes" for some years, which he treated by using his own urine as an eye-wash. He contracted a case of gonorrhea but this did not deter him from using his favorite eye-water. The result was a well marked case of gonorrhal ophthalmia. Query: If there is anything in *similia similibus curantur* why should the "eye-water" treatment have been discontinued?—*Weekly Medical Review*.

Answer: Similia involves a comparison of symptoms, on the one hand such as exhibited by the disease, and on the other such as producible by the agent employed as the remedy for it.—*Dr. Dake*.

And homeopathy is a system of medicine in which such remedies are administered for the cure of the sick, of such a quality, as to excite in the healthy organism, totality of symptoms, the most similar to the totality of symptoms presented by the sick. Do not confound isopathy with homeopathy.

The Urine in Small-Pox.

Gubler some time ago observed that the amount of urea discharged per diem in variola was so much augmented, that even in a sample of the twenty-four hours urine Heller's test yielded a copious deposit of nitrate of urea, and even went so far as to think that such azoturia could help in the differential diagnosis of small-pox from typhoid fever, measles and scarlatina, since the latter, he alleged never yield the spontaneous deposit of nitrate of urea on the simple addition of nitric acid. Robin estimates that the urea discharged in one day in small-pox is, on the average, from twenty-eight to thirty-eight grammes. When variola supervenes during convalescence from another acute disease the azoturia is equally marked.

Robin's most recent investigations, whilst sustaining the position that azoturia is fairly constant in variola, demonstrate its fugitiveness and its presence only during the first days of the illness. There can be no doubt, however, that other acute febrile diseases do yield at times quite as much azoturia as small-pox. It appears further that grave forms of small-pox are those in which azoturia is most marked and most frequent, the ordinary forms being much less commonly associated with an increased output of nitrogen. The more inflammatory the nature of the lesion, the more azoturia will there be. The quantity of urine diminishes, but its density increases, in proportion to the azoturia. The chlorides, diminished at the period of invasion to one gramme, mount again in two grammes and a half during suppuration, until they suddenly rise to eight, ten or fifteen grammes on the day when the hypo azoturia sets in. The phosphoric acid augments during the period of invasion in children as in

adults, and during the suppuration it likewise suddenly falls at the termination of the fever, and does not resume its normal until flesh begins to be put on.

According to Maragliano, the chlorides and phosphate of magnesia disappear completely during grave cases; and this is of prognostic import. The sulphates are believed to be slightly augmented. Variolous albuminuria may precede the small-pox, and, if abundant, is of grave significance; transitory slight albuminuria may be noted at the beginning of the eruption and of suppuration; abundant albuminuria may supervene at any period, and a special kind is the albuminuria of convalescence. In some forms the nephritis causing albuminuria is very intense.

Frerichs has discovered valerianic acid in the urine of variolous cases, Emminghaus fatty acids, and Hoppe leucine and tyrosine. Pouchet extracted a liquid ptomaine, which he regards as a hydro-pyridic base of great toxicity. Robin has only been able to verify the presence of fatty and extractive matters. The indican, also, is augmented in all malignant cases. Strongly pigmented cells, white blood corpuscles and numerous filaments are found in the flocculent deposits, beneath which there exists also a layer of uric acid and urates, and sometimes purple urate of ammonia.—*The London Lancet*.

"A BILL for a state board of health, to define its duties and to provide for its maintenance" is the title of an enactment presented to the legislature of Nebraska. The heading is all right, but what about the bill? Ye homeopaths of Nebraska, sleep not upon your rights in the eyes of the law. Watch the actions of those who avow themselves your enemies. If that bill passes see to it that you have representation upon the board.

Pot Pourri and Personal.

DR. E. M. HALE is spending a few weeks in Florida.

DR. W. W. CAMP will remove from Laredo in a short time.

THE Medical Investigator has changed hands. Dr. W. E. Reed, is now editor and publisher.

CEDAR RAPIDS, Iowa, can soon boast of a medical journal. Dr. A. C. Coperthwaite will guide the plant.

DR. C. T. DURAND, of New York, contemplates going to India, to spread the principles of similia.

FELLOW citizens: Remittances are in order. All money, postal, bank or other orders will come in handy.

F. O. PEASE, M. D., of Morgan Park, Ill. has the Southern fever—pretty bad case—R. Pack up and come at once.

It is stated that Cincinnati has a medical college which graduates "students of medicine" in five weeks. What next?

THE Western Academy of Homeopathy will hold its next annual session at Rock Island, Ill., August 27th, 28th and 29th.

DR. S. O. L. POTTER, formerly of Milwaukee, now occupies the chair of Theory and Practice at the Cooper Medical College, San Francisco.

"DIED of Gravel," is the report of a Pennsylvania jury, as the cause of the death of several laborers, from an embankment caving in upon them.

A PROFESSOR in the Colorado college resigns because of the unethical conduct of his associates in commending a writing upon "womanhood" and "maidenhood."

DR. J. CRESSWELL LEWIS, of Philadelphia, paid the JOURNAL a pleasant call. The Dr. is prospecting, and perhaps we may have him as an addition to our ranks.

ONE of our northern (Texas) brethren, writes, "I'm in' as subscriber to the JOURNAL. Will see you later about the \$2.00." All right doctor, but don't be too late.

DR. E. NIXON, late of St. Louis, is now located at 118 Park Avenue, Hot Springs, Ark. Thus do ye homeopaths journey southward. There is room for the thousands. Gird up your loins and come to the Sunny South.

THE influence of the college alumni is being felt and as a result the attendance is increasing. This year's class will be a large one. For announcement, address,

W. A. DEWEY, M. D.,

834 Sutter St., San Francisco, Cal.

DEAR doctors and gentlemen, your many compliments, congratulations upon the JOURNAL, etc., have been received, duly filed and their contents stored away in the sanctum sanctorum of the heart of its editor. One and all thanks, many thanks. If you were here we'd—?

WE learn from Dr. E. B. Johns, the secretary, that the Kentucky Homeopathic Society meets at Winchester, the 15th, 16th, and 17th of May. The success of the meeting is assured. They know how to do these things in the Blue Grass state.

FLORENCE NIGHTINGALE, the faithful nurse of the Crimean war, is now a patient in the same hospital in London, which many years ago, she herself founded. Her disease is said to be an affection of the spine, from which it is feared she can never be relieved.—*Pacific Record*.

DR. Q. C. SMITH writes: "not a few of us believe homeopathy has already done great good for the *so-called regular* medicine, and promises to do far more good, both for the *so-called regular* medicine, to say nothing of its inestimable ben-

efit to the world at large, in more ways than one." Truth, every word of it.

THE San Francisco Hospital College makes its sixth annual announcement, in a new dress. It is a marked improvement upon former ones, and indicates marked success in the college. But one change is noted in the faculty. Dr. C. W. Bronson now occupies the chair on chemistry.

"HOMŒOPATHY has just commenced to spread her wings. Each age will bring new thoughts and grander developments, until upon the law "similia, similibus curantur" will stand the grandest science of medicine the world will ever see. Toward building this in a way that will benefit all humanity, let us now turn our attention."—[Extract from address of Dr. Sutherland, President of the Wisconsin State Society.]

Three Cases of Angina Pectoris Treated with Iodide of Sodium.

Case 1.—Mrs. —, æt 71 years, subject to terrible attacks of angina pectoris; moderate bronchitis affecting the larger bronchial tubes, old pleuritic adhesions, enlarged heart transversely, insufficiency of the mitral and aortic valves, pulse moderately full, at times irregular; atheroma; slight enlargement of the liver. She was given a solution of sodium iodide, taking about $3\frac{1}{2}$ grains of the drug thrice daily. She frequently had as many as four attacks of angina in a single day. After taking the drug for six months there is no indication of a return, although the organic cardiac complication still remains.

Case 2.—Mrs. —, æt 48 years, suffers from migraine, fibroid phthisis, an hypertrophied liver, a floating right kidney, and croupous nephritis, and has had repeated attacks of pelvic peritonitis. She also has insufficiency of the mitral

valve, with transverse hypertrophy. First attack of angina pectoris one year ago, while in a street-car; was prostrated for four days; after that had seven well-marked attacks. She takes iodide of sodium, 8 grains, three doses daily. Her attacks of angina do not recur, and her other symptoms have materially improved.

Case 3.—Miss A —, æt 49, of neurotic family, rheumatic history; suffers from a large pyo-salpinx, croupous nephritis and insufficiency, and stenosis of the mitral valve. Under the iodide of sodium her attacks of angina, which were severe, long and frequent, have disappeared.—Dr. J. M. Schley, in the *N. A. Journal of Hom.*, October, 1887.

Small Doses of Medicine.

Speaking of the effects of small doses frequently repeated Dr. John Audle, of Philadelphia, in the *Medical and Surgical Register* says: In the case of acute tonsillitis, of acute bronchial catarrh, of impending pulmonary congestion, and of congestive cephalalgia, we obtain immediate favorable results from the administration of one-half drop of tincture of aconite every half hour for several hours. Atropine in dose of one two-hundred grain taken at bed time is very efficacious in the case of incontinence of urine in infants. Small doses of nux vomica, one drop of the tincture or one-twentieth grain of the extract is often more useful as a tonic than larger doses. It is doubtful if any one remedy is able to give better results in the internal treatment of boils, than the sulphide of calcium in doses of one-tenth grain every two hours. One half drop of tincture of Indian hemp, repeated every five minutes, procures very marked relief in many cases of congestive dysmenorrhœa and in neuralgia.—*Kansas City Medical Index*.

In time they will all come around.

A New Method of Quantitative Estimation of Albumen in the Urine.

The possibility of estimating the amount of albumen in fluid by the difference in specific gravity before and after the coagulation of the albumen has been experimentally investigated by Huppert and Zahor, and the last named has attempted to apply the method to the urine. He recommends that the proportion of acetic acid required to coagulate the whole of the albumen on boiling should be ascertained by a preliminary experiment. A specimen of the urine after filtration is then treated with the necessary amount of acetic acid and divided into two parts; one part is put into a bottle which must be stopped with an india-rubber cork, and kept in a water bath at a temperature of 100° C. for ten minutes or a quarter of an hour. The urine is then cooled and filtered, care being taken to prevent loss by evaporation during this process. The filtrate and the portion of acidified urine originally reserved are then brought to the same temperature in a water bath, and the specific gravity of both very carefully taken. The difference between the two figures thus obtained multiplied by 400, the average coefficient ascertained by experiment, gives the amount of albumen in grammes, in 100 cubic centimetres. The average error is stated to be plus or minus 0.0175 gramme, but may amount to 0.05.—*The British Medical Journal*.

A Clivinq Curiosity.

A printer may have a bank and quoins, and not be worth a cent; have small caps, with neither a wife or child. Others may run, but he gets along faster by setting. He will make fine impressions without eloquence, use the lye without offending, and still tell the truth. Though it is impossible for others to stand while they

set, he can set standing and do both at the same time; may use furniture, and have no dwelling; may make and put away pie, yet never see nor eat a pie. Still a human being, he may be a rat at the same time; may handle a shooting iron, yet know aught of cannon, gun or pistol. May lay his form on a bed yet be compelled to sleep on the floor; may use a dagger without shedding blood, and on the earth may handle stars. He may be of a rolling disposition, with no desire to travel.

PLATINA, a most valuable remedy in mental diseases. Whatever the frame of mind of the patient may be, it is always demonstrative, the personality of the patient is obtruded on one's notice.—*Stiles, in California Homeopath*.

THE net debt of the city of Berlin is but little over \$4,000,000; that of New York is over \$100,000,000. The former is moderately taxed, clean, well built and excellently governed; the latter outrageously taxed, filthy in the extreme and badly governed. Why?—*New York Medical Times*.

NEVER give way to melancholy; resist it steadily, for the habit will encroach. I once gave a lady two-and-twenty receipts against melancholy; one was a bright fire; another to remember all the pleasant things said to her; another, to keep a box of plums on the mantelpiece, and a kettle simmering on the hob. I thought this mere trifling at the moment, but in after-life discovered how true it is that these little pleasures often banish melancholy better than higher and more exalted objects; and that no means ought to be thought too trifling which can oppose it either in ourselves or others.—*Sydney Smith, in California Homeopath*.

I am a sectarian in religion, by creed a Protestant, and yet, I hope a Christian.

I am a sectarian in politics, by creed a republican, and yet I hope, an American citizen.

I am a sectarian in medicine, by creed a homeopath, and yet, I hope, a physician.

In religion my peculiar belief in points of doctrine and other theological minutiae does not debar me from all the rights of Christianity.

The direction of my suffrage does not prevent me from availing myself of all the privileges accorded by the constitution to a citizen of the United States.

The manner in which I prescribe my medicines for the sick confided to my care does not or can not eject me beyond the pale of the medical profession with all that thereunto belongs.—*Dr. Wm. Tod Helmuth.*

To earnest lovers of Homeopathy, its growth as a science, appealing to and triumphantly meeting the tests of the modern spirit of scientific inquiry, is no less dear than its growth among the laity, as a wide spread, trusted, and successful method of practice. To such lovers of Homeopathy, therefore there is no more hopeful sign of the times than what may be called the renaissance in our materia medica; the widely-diffused, newly-awakened enthusiasm, manifesting itself in many differing, but unmistakable ways, over the effort to make of our materia medica something deeply founded, solidly built, well compact, together and clinically to be comfortably depended upon.—*Editorial, New England Medical Gazette.*

EXPERIMENTS recently undertaken by Prof. Brouardile, of Paris, on the action

of arsenic and its relations to the maternal milk, have demonstrated that the milk of the women (wet nurses) "contained a relatively considerable quantity of arsenic, although but two to twelve drops of Fowler's solution (liquor arsenicalis; liquor potassæ arsenitis) were administered during the twenty-four hours. After careful experiments on the female animal as well, he came to the conclusion that arsenic on account of the lactic secretion acting as a ready eliminator by predilection for this drug, should therefore be administered with caution to nursing women.—*Homeopathic Journal of Obstetrics.*

Of Potent Interest.

NEW YORK STATE HOMEOPATHIC MEDICAL SOCIETY.

WHEREAS, The old school frankly avows its purpose of abolishing sects in medicine by the institution of single State Boards of Medical Examiners for license to practice medicine; and

WHEREAS, The law should always, as now, treat the great schools of medicine on terms of equality;

RESOLVED, That any bill creating a single State examining and licensing board meets our earnest disapproval, as an insidious infringement upon the rights of the minority, and an innovation upon and reversal of the avowed policy of the State, which, by the incorporation of medical societies and colleges, has declared the three systems equal in the eye of the law.

RESOLVED, That the proposed legislation to secure a single state examining board—being put forward by one part of the medical profession without consulting the others, and with the freely expressed purpose of destroying the individuality of the different schools of medicine—consti-

tutes an attempt at effecting class legislation of the most objectionable form.

RESOLVED. That separate boards of medical examiners under the Regents of the University—a non sectarian and non-professional body—afford the only plan for State licensing consistent with the avowed policy of the state, and is the only measure which can guarantee protection to the vested rights of the three systems of medicine.

Younq Men Who Were Great.

Charles James Fox was in parliament at 19.

Gladstone was in parliament at 22, and at 24 was lord of the treasury.

Lord Bacon graduated at Cambridge when 16, and was called to the bar at 21.

Peel was in parliament at 21, and Palmerston was lord of the admiralty at 23.

Henry Clay was in the senate of the United States at 29, contrary to the constitution.

Gustavus Adolphus ascended the throne at 16; before he was 34 he was one of the great rulers of Europe.

Judge Story was at Harvard at 15, in congress at 29, and judge of the supreme court of the United States at 32.

Martin Luther had become largely distinguished at 24, and at 56 had reached the top-most round of his world-wide fame.

Conde conducted a memorable campaign at 17, and at 22 he, and Turenne also, were of the most illustrious men of their time.

Webster was in college at 15, gave earnest of his great future before he was

25, and at 30 was the peer of the ablest men in congress.

William H. Seward commenced the practice of law at 21, and at 31, was president of a state convention. and at 37 governor of New York.

Washington was a distinguished colonel in the army at 22, early in public affairs, commander of the forces at 43, and president at 57.

Napoleon at 25 commanded the army of Italy. At 30 he was not only one of the most illustrious generals of all time, but one of the great lawgivers of the world. At 46 he saw Waterloo.

The great Leo X was pope at 38; having finished his academic training, he took the office of cardinal at 18—only twelve months younger than was Charles James Fox when he entered parliament.

Only one civilian out of the presidents of this country gained his first election after he was 60, and that one was James Buchanan. The chance for the presidency after 60 is small and growing less.

William Pitt entered the university at 14, was chancellor of the exchequer at 22, prime minister at 24, and so continued for twenty years; and at 35 was the most powerful uncrowned head of Europe.

Hamilton was in King's college at 16; when 19 he made a notable address on public affairs to the citizens of New York; at 20 he was intrusted with a most important mission to Gen. Gates; was in congress at 25, and secretary of the treasury at 32.

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♦ ♦ Editorial ♦ ♦

Well Enough.

By the exercise of ordinary qualities, the best results are achieved, and time must be taken to do this. The great desire to mount the top round of the ladder at once, is the cause of many a man's downfall, and fortune is cursed for it. It is not the blindness of fortune but the want of judgment in those who have suffered. "The great highway of human welfare lies along the old highway of steadfast well-doing." Could we but realize this, and be content with *well enough*, the large majority of us would be far better off.

Common sense and perseverance are the two requisites to success.

Physicians are disposed to be itinerant. An average doctor locates in a community and builds up a good practice. He is respected and all things considered, is doing *well enough*; but soon he hears of brother so and so, who is doing a little better or occupies a more exalted position in the eyes of the profession. Then it is that *discontent* enters the threshold and as a result the community is not large enough, or can not appreciate the man and *well enough* must be improved upon; this the people refuse to do, and

finding their patronage is not satisfactory they withdraw it and some one else succeeds the *discontent*. In a short time another locality is sought and after a while the same series of events recur and thus it goes in a circle, and the doctor never amounts to anything.

Success in any worthy pursuit is meritorious, and what calling is more worthy than that of the physician, therefore his failure, as a rule, must be due to himself. He tries to fit the community to his way of doing things instead of pleasing the people by the exercise of diligence, proper demeanor and successful application of those means at his disposal for the cure of his patients.

Be persistent, be true in spirit and action and success will crown your efforts.

The Study of Medicine.

It is often asserted that the study of medicine leads to atheism, and that a very large number of physicians are therefore atheists. The study of medicine is in its broadest sense the study of man in all his relations and manifestations. It might easily be shown that the proportion of atheists and materialists among physicians is by no means greater than among any other class of persons of equal culture and education. If, however, it be really true that the study of man necessarily

leads to atheism, then it follows that ignorance of one's own nature is but another name for theism, and that only the ignorant can believe in God. If there be danger in the direction indicated, it is the little learning that is the dangerous thing. If the study of man extends only to surface problems, as is too often the case, and is concerned only with sufficient learning to enable one to write a prescription and collect a fee, then the result here as elsewhere may be atheism, as the pursuit is measured by self-interest. Strictly speaking, the study of man has no more to do with the question of theism proper, than has the study of nature. Theism is an element in pantheism; man's idea of God is drawn equally from nature, and from human nature.—*Dr. Buck.*

Truths.

The cosmic form in which all things are created, and in which all things exist, is a universal duality.

Involution and evolution express the two-fold process of the one law of development, corresponding to the two plans of being, the subjective and the objective. Consciousness is the central fact of being.

Experience is the only method of knowing; therefore to know is to become.

The Modulus of Nature, that is, the pattern after which she every where builds, and the method to which she continually conforms, is an Ideal or Archetypal Man.

The Perfect Man is the anthropomorphic God, a living, present Christ in every human soul.

Two natures meet on the human plane and are focalized in man. These are the animal ego, and the higher self; the one, an inheritance from lower life, the other

an overshadowing from the next higher plane.

The animal principle is selfishness; the divine principle is altruism.

However defective in other respects human nature may be, all human endeavor must finally be measured by the principle of altruism, and must stand or fall by the measure in which it inspires and uplifts humanity.

The highest tribunal is the criterion of truth, and the test of truth is by its use and beneficence.

Superstition is not religion; speculation is not philosophy; materialism is not science; but true religion, true philosophy and true science are ever the hand-maids of truth.—*Dr. Buck.*

Personality.

Personality is the most patent fact, and the most potent factor in the life of man; it tinges all he touches, and is the colored glass through which he views the world. The average individual finds it exceedingly difficult, if not impossible, to avoid an inherent tendency to convert all problems that present themselves in thought or life into terms of self-interest. So true is this principle, and so general its operation, that it is exceedingly doubtful if any word in any language conveys precisely the same meaning to any two persons; hence arise the misuse and misinterpretation of words as the most prolific source of the disagreements of men. Both candor and charity compel the affirmation, that truth in its larger sense, has suffered more from those who have misconceived and misinterpreted it, than those who have knowingly or willfully opposed it.—*Dr. Buck.*

SCIENCE is the process by which the mind of man investigates external nature.

Decidedly Clever.

The "regular" doctors attempted to have a fine imposed upon Dr. Well Le Feore for practicing in Hot Springs, Ark., upon a state certificate obtained in another county. A trap was laid to get the doctor to plead guilty and thereby throw himself liable to a fine of \$100 a day for past offenses, in default of which Dr. Le Feore could quit and get out. This was decidedly clever for the "regulars" but an appeal to the attorney general brought the answer: "You have the right to practice in any county in this state without further registration;" *decidedly clever* for the persecuted. The justice of the peace then concluded that he "did not want to annoy Dr. Le Feore any more" and "would dismiss the case." *Decidedly clever—see.*

Assimilation is the crowning act of nutrition.

"I HAVE two objections to the so-called Christian science. The first is, that it is not Christian; the second is, that it is not science."—*Rev. Robert Colyer.*

AN organism is a body having such a structure cellula-vascular, which can take up substances from without; change their character and convert them into their own structure or substance. Nutrition is its basic function.

OFTEN get greater toxic effects from small doses of poisons, in solution, than from a much larger quantity given crude; because the former is absorbed much quicker, and spends its entire force, while the latter is not absorbed so soon, and spends its force gradually, if retained in the body.

♦ • Materia Medica ♦ •

Talk No. 10.—Thoughts on Natrum Muriaticum.

Could life be sustained independent of salt? It would be hard to definitely answer this query. It is present in all the tissues and it would be hard to find an aliment of real nutritious value that did not contain it. It is the great blood and tissue solvent, promotor of secretion and excretion of osmosis both ways of assimilation and disassimilation. It is the great digestive and glandular stimulant and its presence regulates tissue tenacity and blood density. All this considered, its medical functions under the developing process of "similia," grand as they are to-day, cannot approach in importance its noble physiological offices in greasing the whole machinery of the human engine. Its physiological and pathological powers accentuate one another and it is well to contrast them. In moderate quantities it stimulates the secretion of the salivary gastric and intestinal juices by its power of increasing muscular tenacity, promotes intestinal peristalsis. By its power of holding liquids into solution it keeps the crystalline lens transparent, the joints supple and the blood in active circulation.

By its power over the cutaneous glands it keeps the hair flexible and oily, the skin elastic and ruddy. Take the substance in quantities and what a transformation takes place, the vision becomes dim, the joints become stiff, the muscles become weak, the skin loses its elasticity and its healthy hue is substituted by a yellow dead dirty color and it becomes dry from sebaceous suppression. The patient emaciates because of defective capillary absorption, there is a dirty eruption from perverted secretion in the sebaceous glands noticed at the borders of

the hair and around the joints, in short, where these glands are the most numerous the hair falls out or becomes stiff and dry from the same perversion of sebaceous secretion.

The mucous membranes becomes soft and patulous in some places and hard and brittle in others, secreting a profuse watery acid mucous in some places and presenting a dry, brittle surface that cracks from irritation in others.

The intestinal muscles become torpid and weak, the heart muscle loses its tenacity and the blood its proper fluidity; there is tendency to local congestions.

With this picture before us most of the characteristics of the drug must find easy analysis in our minds. Let us see? "Constipation—patient can't pass a soft stool," caused partly by intestinal inertia, partly by dryness of fœces. "Stool fissures anus and causes bleeding," membrane is dry and brittle, so instead of stretching it cracks.

"Patient is intensely thirsty," dryness of mucous membranes and craving for something to relieve it and to restore the flood to its proper fluidity.

"Patient can't digest bread or other farinaceous food," because he hasn't enough salivary or duodenal fluid. "Tongue mapped and hydroa around mouth," same explanation as rectal fissure and bleeding. "Uterus feels as though it would drop out with back ache, both relieved by lying down;" local congestion, uterus too heavy, uterine supporters strained, causing headache. "Cutting in urethra when urinating," acrid urine acting as a local irritant.

"Congestive headache with feeling of little hammers all over head," local congestion capillary stagnation.

"Falling out of hair," due to faulty sebaceous secretion. "Scanty menstrua-

tion," due to perverted osmotic function.

The abuse of quinine combined with malaria reduces a patient to a condition very homeopathic to *nat mur*, *i. e.* Dead dirty skin, first dry, then covered with a clammy sweat, dry mouth, thirst for quantities, anæmia, œdema, perversion of function of osmose, and hence of glandular secretion and all the processes of digestion. The mental symptoms of the drug are those of melancholia, anæmia, a defective nutrition, we would not under-rate their value in homeopathic prescribing, but an attempt at their further pathological analysis would be bold to the point of absurdity.

Every drug produces a pathological lesion or a physiological perversion which furnishes the key to the so-called "genius" of the remedy furnishing the grand central thought around which the symptoms, revolve, as spokes around the hub of a wheel. This is especially true of *Nat. mur.*, as the thoughtful mind would readily perceive, even from the trend of the thoughts hereinbefore elaborated. What is this "thought," this "peg" from which all the symptoms of *nat. mur.* are adduced, evolved it is "osmose," both "endos" and "ex-mos" in variety.

Comparative.—The anæmia of the drug under discussion differs from that of Ferr. Phos and Calc. Phos, in that the blood of *Nat. mur.* need not be too thin, and hence the anæmic murmur need not be present, but the patient's whole aspect is incompatible with proper blood nutrition.

Graphites.—Has the constipation and brittle orifices and scanty menstruation.

Natrum mur. has the red sand in the urine similar to *Lyceo* and *Lyceo* has skin like that of *Nat. mur.*, so has *Sepia*,

though this latter has a flushing of the face under excitement or digestive or uterine disorders.

Sepia also has a cutting in the urethra, while urinating and a uterine prolapsus, relieved by lying down.

The constipation of *Ferr. Phos* is much like that of *Nat. mur.* and a comparison is not without value. The excessive thirst for quantities under *Bryonia* is generally accompanied by high fever and hence excessive tissue combustion.

A. L. MONROE.

Amenorrhœa.

Belladonna—General hyperemia, rush of blood to the head; general coldness, chilliness when the menses should be present; more or less throbbing about the temples.

Gelsemium—Drowsiness; violent throbbing about the head; face not flushed, eyes not glazed; urine passed freely and in large quantities; congestion of the kidneys; albumen in urine.

Aconite—From fright, violent emotion; suddenly checked.

Apis—Congestion of the head; great deal of bearing down; more or less congestion of throat; hysterical young girls; incoordination of muscles.

Sepia—Great deal of leucorrhœa; patient wants to be moving about, wants no confusion; persistent bearing down; noticed more when in a sitting posture.

Platina—Those who have been upon salt water. Painful pressing down, as if flow was going to commence at any time.

Conium mac—Where there is a great deal of tenderness of the breasts all the time, breasts enlarged; more or less tenderness of either ovary; slight tumefaction of tissue in the iliac regions, and very tender pressure.

Cuprum—When associated with perspiration of the feet; violent cramps in the abdomen about the menstrual period; vertex headache, pale face; palpitation of the heart; disturbance comes on at night. *Hystero*—epileptic form.

Bryonia—Congestion of the head and with it marked constipation; some derangement of the stomach; epistaxis.

Arsenicum—Pale waxy countenance; peculiar thirst; more or less leucorrhœa, may excoriate; burning of throat, restless, worse in evening.

China—Sleep is disturbed, they dream more or less; pale face, blue condition around eyes, headache every day, especially in the evening, supraorbital, comes on at night; fulness of abdomen.

Dulcamara—Suppression in consequence of cold from exposure; breaking out on chin, rash on the face.

Calc. carb—Frequent rush of blood to the head, tight feeling about the face, patient wants to lie down; palpitation of the heart upon ascending; hands and feet cold clammy; patient will never look you in the eye; cannot take long walks, disinclined to go out in the evening; also where there is some discrasia.

Nux Moschata—Marked hysterical condition; bloating of the abdomen.

Mercurius—Prolapse of the vagina, rush of blood to the head, patient is despondent and peevish.

Causticum—Weak scrofulous patients, very melancholy; spasms; pain low down in sacrum; in *coccycodynia*; leucorrhœa worse at night.

Pulsatilla—Patient menstruates once or twice and complete cessation follows; menses never abnormally established; flow strings along four, five, six or eight days; dampness of feet; vicarious menstruation.

Graphites—Dryness of the vagina,

itching of the labia, vulvar leucorrhœa; scrofulous diathesis; menses appear every two or three months; gradual diminution; blotches on skin.

Sanguinaria—Associated with pulmonary difficulties; sick headache, rush of blood from below up.

Secale—Scrawny girls, no mind of their own, disposed to sit around.

Opium—Marked congestion of blood to the head; patient feels heavy and stupid, constipation, convulsions, cannot get fecal matter out of the rectum; sleepy after supper.

Typhoid Fever.

Baptisia—It is suitable to all stages, its action is prompt and the drug should not be continued over 24 hours at a time, well marked fever; offensive exhalations; brown or blackish coated tongue (rhus); besotted appearance of the face (rhus); discharges from bowels, dark fluid and very offensive, drowsy, stupid, sordes form on the teeth, great weakness; dull heavy headache; slight sensitiveness in ilio-cecal region and yellow putrescent stools (early stage.) *It acts on secretions.*

Bryonia.—Very restless, nervous, irritable, thirst for large quantities of water, flabby tongue, slight white coating, cheeks flushed; chilliness, hot skin, perhaps a little nausea, perspiration sour or oily.

Rhus Tox.—Pains in joints relieved by motion; continued fever, dark copper colored hue of skin; sordes on tongue (clean off with a little salt and water); gathering of sordes on teeth; tongue coated brown; heavy lethargy; low delirium; may have pains in abdomen, offensive flatus passing from body, considerable thirst or little or no thirst; yellowish brown stools of a cadaverous odor. It is

a glandular remedy and acts best upon those of mild temperaments.

Arsenicum—The tendency of the symptoms is deathward, therefore you may give the drug too soon in a disease which in itself tends deathward, and precipitate the result you are anxious to avoid, complete exhaustion; faints away; cold sweat on the body; tip of tongue red, dark brownish coating; aphthous condition of mouth, profuse dark colored stools; stools may be aggravated by eating and drinking; urine may be retained from atonic condition of muscular fibres of bladder; high fever, patient may be nauseated by very little water; great thirst, drinks little.

Belladonna—Tongue large, flabby and red all over, dilatation of pupils, throbbing carotids, face pale or red, urine scanty; general condition of venous congestion.

Terebinth.—Urine dark; cloudy and smoky; dull pains in region of kidneys; great weakness of patient; dry, smooth, glossy tongue or furred, fur comes off in patches, leaving raw surface beneath; profuse mucus and watery diarrhœa; this drug is usually best indicated about the end of the second week.

Gelsemium.—Especially indicated during first week, the patient feels sore and bruised all over, drowsy, loss of muscular power, suffused red faces, *tongue brown coating in the middle, balance quite red, coating inclined to remain; basilar headache, throbbing, comes in waves; pulse jerky, unsteady, very irregular, it lunges and flounders about.*

Aconite and Veratrum Vir.—For symptoms of collapse.

The best single remedy when everything is doing nicely and the patient suddenly collapses is aconite, 4 or 5 drops in $\frac{1}{2}$ glassful of water, dose every five minutes; nitric acid ranks next.¹

Purulent Conjunctivitis.

Apis Mellifica.—Marked pale oedematous condition of the lids; great chemosis; sharp stinging pain; hot profuse lachrymation, less tendency to formation of pus (*Rhus*); the exacerbation is in the evening, and cold water relieves the inflamed lids. *Argentum Nit.* when you have no other clearly indicated remedy and case is in 2nd, or 3rd week, with muco-purulent discharge, give this drug in the 3x or 6x trituration.

Euphrasia.—Little blisters are phyc-tenu-lae form on or near the cornea; discharges of the eye are acrid and purulent; a film of mucus seems to form over the cornea. It is especially indicated in the latter stage of ophthalmia neonatorum; great, heavy, thick, greenish discharge which takes the skin off where it touches.

Hepar, S. C.—When the cornea is invaded and ulceration has taken place; intense photophobia; discharge heavy, thick and yellow; patient cannot bear to have eye-lids touched, they are so sensitive; throbbing, beating pain; cannot bear any cold, relieved by warmth.

Mercurius, S. C.—Ophthalmia neonatorum, where discharges are thin, exco-riating and caused by syphilitic leucor-rhea; one of the best remedies in gonorrhoal ophthalmia, and Puro-conjunctivitis found in syphilitic subjects; pains worse at night. It is one of the principal corneal remedies.

Nitric Acid.—In gonorrhoeal ophthalmia; lids swollen, red, hard and painful; conjunctiva chemosed; cornea ulcerated; great photophobia and lachrymation; copious discharge of yellow pus pouring down over the cheek; pains pressing and burning in eye.

Pulsatilla.—In second and third stages, where there is a heavy, thick, yellow or creamy discharge, which does not exco-

riate. It is an intercurrent remedy. Aggravation in the evening and open air. If *arg. nit.* fails to clear up give *pulsatilla*.

Rhus. Tox.—In sore eyes of new-born babes where exposure to bad weather is the predisposing cause; lids bright red, oedematous and spasmodically closed; high degree of inflammation; conjunctiva especially inflamed so that when the lids are open the red swelling appears with a thick yellow purulent discharge. Baby is cachetic and restless.

Sulphur.—Is indicated when from irritation of foreign body after aconite has failed. The eyes are red and injected, and there is a feeling of as a splinter of glass in the eye. Aggravations in warm weather and from heat of a stove. In chronic ophthalmia neonatorum when not dependent upon syphilis.

Removal of Placenta.

By Dr. Butler.

For some time past I have been using the wire of a No. 12 English Catheter to assist in removing placenta, when delayed. I double the wire on itself, then from the loop end I bend down about $\frac{1}{2}$ an inch—to the angle of 45 degrees or a little less. With this instrument follow along the finger to the edge of placenta, advance the instrument about an inch further, then as you withdraw it, press the hook into the placenta; now you have a firm hold and in no danger of lacerating any of the parts or pinching them; with the disengaged hand you may lightly compress the womb, while gently making traction with the loop.

Fort Scott, Kansas, has lost a good citizen and the community a true physician in the person of Dr. A. P. Forster, who departed this life at that place on the 26th ultimo.

Ficus Indica.

Sleep.—Setting in late, and are long in time, and comes subsequent afterwards.

Mental condition.—Depression with weariness of sleep, dislike for any occupation, sadness, increased irritability and discouraged mood.

Brain.—Loss of intellectual power, confused ideas, forgetfulness, vertigo, especially upon rising from a recumbent position, heaviness, dullness, confusion and flushes of heat from the head.

Organ of hearing.—Sensation of obstruction in the ear and hardness of hearing.

Spinal marrow.—Flying pain, rheumatism on the armpit and hands.

Heart and Blood Vessel.—Frequent palpitation, also upon slight motion and mental emotion, febrile motion, sensation of heat over the whole body.

Digestive organ.—Collection of saliva, loss of appetite, sensation of discomfort in the stomach and distention in the abdomen, sweetish taste in the mouth, constipation.

Urinary and sexual organ.—Excessive flow of urine, urine passes involuntarily, chronic gonorrhoea and spermatorrhoea, urine with or without albuminous casts painful drawing in the spermatic cord.—*Calcutta Dispensary.*

EVERY atom of the universe is set to music, when the key is struck which corresponds to their molecular structure, and then they begin to dance.

THE energy in every body is over or above that necessary for the body and this surplus can be used by man for various purposes.

♦ ♦ **Surgery** ♦ ♦**A Case of Circumcision by Dr. Meadow.**

BLOCTON, Ala., April 3, 1889.

Willie Bryan Cross, aged 5 years, had diarrhoea and ptialism since a year old. Lower lip and corners of the mouth badly excoriated. When the diarrhoea was better, the mouth worse or the reverse, would alternate about every two weeks. Is dumb and somewhat idiotic. Was attending another of the family in December, 1888, when I told the mother he probably had a tight foreskin that kept up the trouble. She said no physician had even told her so before, and that they pronounced it "diarrhoea" from his teething, and seemed to believe nothing would relieve him.

On examination I found the opening in the foreskin very small, barely large enough to admit a broom straw. By telling her she would be compelled to have him circumcised before he was much older, and the sooner the better; that I was confident it would cure the mouth and benefit the diarrhea, she consented for me to circumcise him. In one month he was well of both troubles, and his mind is improving.

He never received a dose of medicine and is improving in general health.

A. E. MEADOW, M. D.

Citholapaxy.

By W. E. Green, M. D.:

LITTLE ROCK, Ark., March 15.

I was called to Hot Springs by Dr. S. M. Work, to operate on a case of stone in the bladder. The patient, a male, aet. 54, of robust habit had been suffering from cystitis for a long period. Dr. Work had operated upon him for ureth-

ral stricture, treated his vesical trouble and diagnosed the calculus.

Upon exploration I found a large unobstructed urethra, a capacious and rather tolerant bladder. The sound revealed a small stone that gave forth a loud and distinct click.

I diagnosed a hard calculus (oxalate) the size of a large almond. I considered the case one favorable for litholapaxy and assisted by Drs. Work and Thoman, proceeded to operate. After etherizing the patient, I washed the bladder with a strong boro-glyceride solution, six ounces of which was left therein.

The lithotrite, Bigelow's instrument, was introduced and the stone readily grasped. It was found to be very hard and would fly from the instrument, seemingly only scales or fragments would be broken off. At times great force was used that would spring the blades. Finally it broke into fragments, after which comminution was rapidly accomplished. The evacuate was then applied and the debris removed. The operation was tedious, lasting just two hours. I was completely tired out and my hands were blistered. The patient remained in bed but a single day and is now entirely well. Two carefully conducted explorations since failed to find a fragment.

I have performed litholapaxy three times and in neither case was the patient confined to bed for more than a day. One patient arose from the table and immediately went about his business, absolutely refusing to lie down.

Dr. H. F. Fisher, brother of the editor of *THE JOURNAL*, is now located at Austin, and will give special attention to diseases of the eye and ear. It is rumored that the doctor is soon to join the benedicts. Congratulations, doctor; may you live long and prosper.

♦ ♦ Correspondence ♦ ♦

[Correspondence from New York.]

Our Letter from Dr. Fisher.

New York, April 5th, 1889.

Dear Journal:

In my last letter, which was written from Chicago, I told you I would say a few words about the homeopathic department of the University of Michigan, at Ann Arbor, before I commence to tell your readers about the status of affairs in this city, and I must say that it affords me pleasure to comply with this promise.

As is generally known, the homeopathic department of Ann Arbor was the first trial of our school in a university. Boston came next, then Iowa City, and finally the Minnesota brethren won their way into the medical department of the university of that state last year. Homeopathy succeeded in the Michigan fight in 1876, if I mistake not, and that fall our department commenced operations with two chairs, one on *Materia Medica* and another on *Practice of Medicine*. The profession of the state was not united; the experiment was undertaken with fear and trembling, and for a number of years the classes were small; the opposing factions fought for what spoils there were in sight, and things generally were not lovely. The prejudice of the old school and their determination to down us, no matter what the cost, brought about conflicts between the professors and students of the two opposing systems, more than one "knock down" argument being brought to bear before peace was secured; the board of regents was more than once unfortunate in its selection of teachers in our department, and for the first decade of its life the new college at Ann Arbor struggled along through much turmoil and uncer-

tainty, upheld by a few honest and earnest men who stuck by it through thick and thin, until finally, the dawn of commencing success broke in upon it and a new era was announced.

Just where the troubles of the Ann Arbor institution arose from this deponent saith not; nor does he care. Let the past go. The present is satisfactory, and the future radiant with promises of successful work, and this is enough. Other states in which medical departments are about founding can profit by the lessons of Ann Arbor, but this writer is not a pedagogue and objects to the job of analyzing the past and drawing deductions for others for their guidance.

At the present moment the homeopathic department of the university of Michigan is in a flourishing condition. I was most agreeably surprised to learn what I should have known before, that this institution requires three courses of lectures of full nine months each, against but two courses of twenty weeks each on the part of many of our western colleges. This sounds like business, and to the credit of homeopathy be it said, that all of the colleges hoping for recognition from the American Institute of Homeopathy, must hereafter come up to the three course of lecture requirement. The time has passed for men and women to be turned loose upon their fellows as physicians and surgeons, with but two short courses of lectures as their college and hospital training.

I was also agreeably surprised to find a much larger class of students in attendance at Ann Arbor than I had expected to see, the number reaching about seventy—a most gratifying omen when the length of the college term is considered. The class, as in fact are those in attendance on our colleges everywhere, was

thoroughly creditable in personal make-up. It consisted of above fifty men and nearly twenty women, and the quizzes to which I listened proved that they are intellectually bright and that their training has been excellent.

Prof. Obetz, the dean of the college, is the professor of surgery. He is a most thorough teacher and is pronounced an expert operator. I regret that I did not have an opportunity to see him use the knife. Prof. Wood occupies the chair of obstetrics and gynecology and fills every inch of it. He is a young man and a graduate of the institution in which he is now a teacher. It was my good fortune to witness a vaginal hysterectomy and an abdominal oophorectomy by him in the presence of the senior class, both of which operations were deftly and skillfully performed. Prof. MacLachlan, the editor of the *Counselor*, is professor of principles and practice of medicine and his work is thorough and practical. He too, is a graduate of the institution in which he is now teaching. Materia medica is expounded by Prof. Arndt, who knows as much about this department of our art as any one man in the school, and who teaches it in a more careful and scientific manner than do a good many of our professors on this subject. The fact is, beyond the love all these men have for their work, and they are all enthusiasts in it, the length of the term gives them ample time to systematize their work and put it in good shape. Besides, they are salaried officers of a great university and are responsible to the powers that be for the manner in which their labors are performed.

There is one serious objection to the college at Ann Arbor—the absence of ample hospital facilities. Yet in spite of this the clinics are much better than would ordinarily be expected in so small

a city. Fortunately however, the regents are treating us fairly and a seventy-five thousand dollar hospital is in early prospect. If this is secured the homeopathic department at Ann Arbor will be all that its warmest friends in Michigan can reasonably expect it to be—at once a profit and a pride to our interests in that state and to homeopathy at large as well.

The *Counselor* is flourishing under the management of Prof. MacLachlan, who is assisted in its conduct by his colleagues.

The *Advance* has its home here also, and its editor, Dr. Allen, is quite flushed with its success. Your correspondent desires to acknowledge to these gentlemen and to Profs. Wood and Arndt, his grateful appreciation for courtesies extended him during his stay in their city. His visit was very enjoyable and was attended with profit.

* * * * *

My letter about Ann Arbor is longer than I expected it to be, and I shall not undertake to "do" New York fully in the same chapter. There is so much to be seen and heard in this great medical metropolis, that barely to touch upon the leading features of interest would require a whole issue of *THE JOURNAL*. I will try, however, to give you a newsy letter from this city for your May issue.

C. E. F.

Dr. M. J. Bleim, for several years with Prof. Pratt, has pitched his tent in San Antonio. This is quite a gain to the city, of which the people will know how to take advantage, the doctor's reputation being such as to entitle him to their confidence.

For Sale:—Oxygen outfit. A hundred dollar apparatus at a bargain. Address, Box 653, Hyde Park, Ill.

♦ ♦ Societies ♦ ♦

Kentucky State Society, Officers and Members.

Officers—C. P. Mendite, president, Eminence, Ky.; H. C. Kehoe, vice-president, Carlisle, Ky.; E. B. Johns, secretary, Danville, Ky.; C. N. Cooper, corresponding secretary, Winchester, Ky.; J. A. Vasant, treasurer, Point Sterling, Ky.

Board of Censors—J. A. Lucy, chairman, Lexington; E. M. Gober, Frankfort; J. T. VanZant, Paris; E. G. Allen, Georgetown; O. H. Buck, Paris; J. T. Bryan, Shelbyville; H. Benlay, Lexington; Geo. Brown, R. L. Carriett, Georgetown, Ky.; Howard Crutcher, Memphis, Tenn.; M. Dills, Carlisle; — Daugherty, Corinth; J. F. Edgar, Lexington; R. R. Fitch, Frankfort; C. S. Holton, Richmond; H. C. Kassellman, Midway; C. A. Mayer, Louisville; W. O. Mullin, Augusta; A. L. Monson, Louisville; G. M. Ockford, Lexington; J. M. Patterson, Augusta; W. P. Roberts, Lexington; G. W. Righter, Ruddell's Mills; D. C. Rees, Owenton; J. H. Emyser, Cynthiana; C. W. Taylor, Louisville; J. R. Welsh, Nicholasville; S. M. Worthington, Versailles, and J. L. Wilds, Ambron, Ky.

Shall we have the pleasure of seeing you at the next meeting. J.

Wisconsin Homeopathic Medical Society

The twenty-fifth annual session of the Homeopathic Medical Society, of the State of Wisconsin, will be held at Racine, Wis., on Wednesday and Thursday, May 29 and 30, 1889, commencing Wednesday at 11 o'clock a. m.

WEDNESDAY, 11 A. M.

Reading of minutes.

Roll call.

Reports of officers, committees, etc.

Reports of Bureaus.

1:30 P. M.—OBSTETRICS.

Julia Ford, M. D., Chairman, Milwaukee.

GYNECOLOGY.

C. H. Hall, M. D., Chairman, Madison.

ANATOMY, PHYSIOLOGY AND PATHOLOGY.

Alma J. Frisby, M. D., Chairman, Milwaukee.

8 P. M.—ADDRESSES OF THE PRESIDENT.

E. W. Beebe, M. D., Milwaukee.

THURSDAY, 9:30 A. M.—MATERIA MEDICA AND PHARMACOLOGY.

Lewis Sherman, M. D., Chairman, Milwaukee.

CLINICAL MEDICINE.

Joseph Lewis, Jr., M. D., Chairman, Milwaukee.

1:30 P. M.—SURGERY.

W. Danforth, M. D., Chairman, Milwaukee.

Miscellaneous papers.

Election of officers, etc.

OFFICERS OF THE SOCIETY.

President, E. W. Beebe, M. D.

Vice-presidents, C. H. Hall, M. D.; Julia Ford, M. D.

Recording Secretary, F. D. Brooks, M. D.

Corresponding Secretary, C. S. Crandall, M. D.

Treasurer, Alma J. Frisby, M. D.

CENSORS.—Lewis Sherman, M. D., A. G. Leland, M. D., W. A. Reed, M. D.

COMMITTEE ON LEGISLATION.—C. H. Hall, M. D., O. W. Carlson, M. D., Lewis Sherman, M. D., E. F. Storke, M. D., Joseph Lewis, Jr., M. D.

COMMITTEE ON CODE.—C. H. Hall, M. D., E. F. Storke, M. D., A. G. Leland, M. D.

The Missouri Institute.

KANSAS CITY, Mo., March 22, 1889.

Dr. G. G. Clifford:—

DEAR DOCTOR:—The Missouri Institute of Homeopathy is flourishing and showing more signs of life than any other western homeopathic society. The meeting at Springfield, Mo., April 23, 24 and 25, 1889, will be largely attended

and upwards of fifty papers will be read on various surgical and medical subjects. The St. Louis & San Francisco Railroad, and the Kansas City, Fort Scott and Memphis railroads will give reduced rates. Physicians and their families will pay full fare going to the meeting. At the starting point on either of the above lines certificates must be obtained from the railway agent and these must be presented at Springfield to Dr. F. F. Casseday, committee on transportation, in order to secure reduced rates on return.

Some of the names and titles of papers are as follows:

J. S. Mitchell, M. D., Chicago.—“Carcinoma.”

Clifford Mitchell, M. D., Chicago.—“Differential diagnosis between pyelitis and diseases of the neck of the bladder. With cases from practice.”

Julia Holmes Smith, M. D., Chicago.—“Mammary inflammation and its treatment.”

E. H. Pratt, M. D., Chicago.—“Clinic to illustrate the principles of orificial surgery. The physicians of the southwest are hereby earnestly requested to bring with them to this Clinic, their patients suffering from rectal diseases. Rectal Pockets, Papillae, tight sphincters, hemorrhoids, ulcers, etc.; when found will be fully demonstrated, and gratuitously and successfully treated.

J. B. Delamater, M. D., Chicago.—“Uraenia Chronica.”

W. E. Green, M. D., Little Rock.—“Fistula in Ano.”

E. Lippincott, M. D., Memphis.—“Orificial cases from practice.”

J. P. Dake, M. D., Nashville.—“The True Line of Homeopathic Progress.”

Geo. M. Ockford, M. D. Lexington, Ky.—“Generalization in the Study of the Materia Medica.”

A. C. Cowperthwaite, M. D., Iowa City.—“Hydrophobinum.”

J. A. Campbell, M. D., St. Louis.—“Eye Cases from Practice.”

S. B. Parsons, M. D., St. Louis.—“Endoarteritis obliterans causing gangrene of both legs and double amputation.”

Wm. C. Richardson, M. D., St. Louis.—“The Pernicious Vomiting of Pregnancy.”

C. H. Goodman, M. D., St. Louis.—“Cerebro Spinal Fever.”

H. W. Westover, M. D., St. Joseph.—“Urinary Deposits.”

W. L. Reed, M. D., St. Louis.—“Some Interesting Sepia Cases.”

J. Martine Kershaw, M. D., St. Louis.—“The Backaches of Women.”

W. B. Morgan, M. D., St. Louis.—“When to Undertake Hazardous Operations.”

W. Jno. Harris, M. D., St. Louis.—“Diphtheria.”

Amanda J. Rockwell, M. D., St. Louis.—“Notes from the New York Clinics.”

Wm. D. Foster, M. D., Kansas City.—“Phimosis as a Factor in Neuroses.”

H. A. Barber, M. D., Kansas City.—“Obsterical Progress.”

Howard Crutcher, M. D. Memphis.—“Impure Drinking Water.”

Joshua Thorne, M. D., Kansas City.—“Hypnotism.”

J. C. Cummings, M. D., St. Louis.—“What can we do to make our *Materia Medica* more scientific and less cumbersome?”

Any homeopathic physician in good standing is most cordially invited to be present and read a paper on some medical subject or take part in discussion. Physicians from other states are earnestly requested to attend this meeting and join our organization. It is hoped that the physicians of the south and south-

west will consider this meeting to all intents and purposes their own, and that they will try to make it a great success.

Yours Fraternally,

MOSES T. RUNNELS,
General Secretary.

American Institute of Homeopathy.

ANNOUNCEMENT OF THE SESSION OF 1889

Editor Southern Journal of Homœopathy.

The American Institute of Homeopathy will convene in its forty-second annual session, at Hotel Lafayette, Lake Minnetonka, Minn., (near St. Paul and Minneapolis,) on Monday Evening, June 24th, the session continuing until the following Friday night. The place of meeting is one of the largest summer hotels in the country, capable of accommodating upwards of six hundred guests without inconveniencing or crowding and furnishing adequate provision for the general and sectional meetings and the various committees of the institute. The entire hotel and its force of attaches will be practically at the disposal of the institute during the week. The situation and arrangement of the hotel are such as to afford a lake-view from each and all its rooms. The apartments are spacious and airy, with high ceilings, and all the appointments are such as pertain to a first-class hotel. Terms three dollars per day.

“Minnetonka,” with its deeply indented shores, its irregular bays and jutting headlands and its numerous islands, is described as one of the most beautiful inland lakes in America. Several excursion steamers ply on its waters, and its fine scenery and excellent hotel accommodations attract thousands of summer sojourners to its shores.

Medical organizations are invited and

requested to send delegates to the meeting as follows:

Associations composed of more than fifty members from different states, two delegates, with an additional delegate for every twenty members; state societies two delegates and an additional delegate for every twenty members; county and local societies, hospitals, asylums for the insane, dispensaries and medical journals one delegate each; colleges two delegates each to form the Intercollegiate committee. It is not necessary that delegates be members of the institute.

Physicians desiring to become members are required to present to the board of censors, a certificate signed by three members of the Institute setting forth that the applicant has pursued a regular course of medical studies and sustains a good moral character, and professional standing. The applications should be accompanied with the initiation fee of \$2 and the first year's annual dues of \$5. Blank applications for membership may be obtained from the secretary or from the chairman of the Board of Censors, R. B. Rush, M. D., of Salem, Ohio.

Homoeopathic state and local societies, hospitals, dispensaries, colleges and journals are requested to fill out and return promptly the statistical blanks which will be forwarded to them by the Bureau of Organization, Registration and Statistics, in order that the Bureau's report may not be delayed. Physicians having knowledge of the life, services, etc., of any member of the Institute who has died since June 1, 1888, will confer a favor by communicating the facts to Dr. Henry D. Paine, the Necrologist, No. 19 West 24th street, New York City.

Papers designed by their authors for publication in the journals after presentation to the Institute, should be prepared in duplicate, and one copy placed in

the hands of the general secretary before the close of the session, as required by the by-laws.

The committee on railroad fares will announce in due time, the arrangements that have been entered into for a reduction of rates to physicians and their friends in attendance at the session.

The "Annual Circular," giving full details, together with the programme as prepared by the committee, will be issued in May. Any physician failing to receive a copy before June 1st, can obtain one on application to the undersigned.

PEMBERTON DUDLEY, M. D.

General Secretary,
Southwest corner 15th and Master sts.,
Philadelphia.

Vaccination.

BY DR. JOSEPH JONES.

We see and hear much about *pure* "bovine virus," and the belief prevails in the public mind that every physician is supplied (especially during the epidemics of vaccination) with a stock of it. It is true that most physicians keep themselves supplied during the seasons of vaccination, but the purity admits of very serious doubt.

Vaccine is an article of commerce, therefore has a mercenary element. There is competition in its culture and sale, which we have reason to believe has encouraged the culture of the cheapest and worst, instead of the purest and best.

Granting few exceptions, members of the profession accept without question or hesitation the uncertain article and without hesitation insert into the blood of helpless infants and children, ever ready to declare they are using pure cow-pox virus.

If all physicians were intelligent upon the results of vaccination, and possessed

of courage to answer truthfully the questions of the public and those who apply for vaccination, the number of vaccinations would be wonderfully reduced. We would, when asked the question, "is the virus you are using uncontaminated?" without hesitation answer, we do not know. When asked, "is it genuine cow-pox virus?" we would without hesitation answer, no.

Accepting Jenner and modern writers as reliable authority, it is a safe proposition that there is not a point of cow-pox virus in the United States. The only cow-pox to which Jenner ascribed any virtue is the filth disease (*eczema pustulosum*) communicated to the udder of the cow by dirty stable boys who soiled their hands with matter from the greasy heels of badly kept horses. It is not a disorder to which the bovine race is subject.

This is amply shown by the fact that male cattle never had it. He submitted that a zymotic disease confined to one sex would certainly be an anomaly in nature. Jenner declared that, cow-pox *never* originates spontaneously in the cow, is not one of her natural disorders. That should a disease of similar appearance *ever occur* spontaneously it should be regarded as a spurious form of pox and utterly worthless for vaccinal purposes. When he introduced vaccination he was very careful to designate for use a certain kind of virus, viz: that derived from horse grease, and transferred to the cow, goat and swine; he vaccinated his own son with the latter when he was one and a half years of age; afterwards he inoculated him repeatedly with small-pox. He died in his twenty-first year of pulmonary consumption, induced no doubt, by the vaccination inoculations of both swine and small-pox.

The cow-pox virus used by Jenner has

been superceeded by humanized cow-small pox virus.

Although the former originated from a scrofulous disease of the horse, of the two evils it is the least, being less potent to produce evil results. Yet we are left without a choice, it being doubtful if a single point of unhumanized virus could be found.

Vaccination was scarcely accepted when humanized virus was introduced. In 1801 Gassner inoculated a number of cows with human variolus virus, from which he obtained a stock of vaccine lymph, with which he vaccinated a number of children.

In 1836 Dr. Theele, of Kason, obtained a stock in the same manner, with which he vaccinated through seventy-five transmissions, many thousands of human beings. This experiment has been repeated many times in this country by those who have been, and by those who are now engaged in the business of producing vaccine matter. This is the kind of virus furnished the medical profession, and the only kind except that taken from the arm.

It was claimed by Jenner and is affirmed by members of the medical profession who have given much attention to the subject of vaccination, the source of the vaccinal material, its value, etc., that the only virus which possesses any power whatever to prevent or modify small-pox is cow-pox virus, derived from horse grease. Inoculation of cows with small-pox does not produce cow-pox but small-pox and nothing else.

Of all the crimes committed against infants and children, in enormity, arm to arm vaccination stands next to the slaying of all the children two years of age and under, in Bethlehem. It is enough to cause an honorable physician to feel ashamed of his calling to see members of

his profession peddling vaccination crusts from house to house. This method was carried to its ultimatum when in the great metropolis of this country, the mothers dwelling in an unwholesome quarter were required to report at a certain dispensary on the twenty-first day after vaccination of their children and deposit the scabs from their arms into an open mouthed fruit jar. To this mass of filth and corruption a sufficient amount of water was added from time to time to soften the scabs into a paste, into this filthy mixture quills were dipped, dried and then sold throughout the country.

Fever and Ague—Belladonna.

Cases constantly appear in the homeopaths practice impressing him with the universality of the law on which his practice is founded.

For certain diseases we are accustomed to refer to certain groups of remedies, because the varying cases of these diseases call for these varying remedies.

Thus in fever and ague, we are accustomed to think of *ars. natrum mur*, *eup.* *perf.* *nux-v* and *cinchona*, because the large majority of cases are cured by one of this group.

Recently I was called to attend a family of three children, all suffering with the combined effects of malaria and quinine. At times the malaria was uppermost—tormenting the little sufferers with chills and fever; then quinine would be turned loose and overthrow malaria for a time, while its own morbid phenomena would monopolize attention.

The mother, herself an invalid, not having closely observed the symptoms, could not give a full account of the cases.

But two of the patients seemed to call clearly for *ars*, and the third also gave

some indications for that drug. It had already proved itself the *genus epidemicus*.

R. *Ars.* 3 doses daily.

A few days later I called again, finding the younger two children cured.

The oldest, however, persisted.

She seemed to have some symptoms of *Bell.* Also of *nux* and *ars*. Having tried *ars*, and having never heard or thought of *Bell* in such cases, I gave *nux*

Result, same as with *ars*.

Taking Allen's treatise on intermittent fever, I compared case and drugs on the occasion of my next visit.

The dilated pupil, and throbbing frontal headache directed my attention to *Bell*.

Additional symptoms, feet and legs ice cold during chill, no thirst.

During fever headache as above, with moderate thirst, moderate restlessness and slight cough.

Sweat also moderate.

Apyrexia—Frontal headache, pain in right lower chest, a little above liver, dull and persistent, face thin and sallow, yellowish, constant languor.

R. *Bell*, and as present attack was subsiding, gave a dose at once.

Result, aggravation of all symptoms of that attack. Then next day, three doses. Second day, another attack—light. Three doses daily. Pains of head and side in apyrexia ceased. No further attacks—languor passing off, complexion improving. Case cured.

Will just mention another case of chills and fever peculiar in calling for an unusual remedy—opium—which cured in a few days.

H. B. STILES.

"The health of man is in incessant strife with ignorance, and this struggle commences with the first moments of his life."—Harttaub.

To Whom It May Concern.

MEMPHIS, March 28, 1889.

In reply to a request for "a list of members of the Southern Homeopathic Medical Association," I beg to submit the following:

First and foremost, John H. Henry, of Montgomery, who would go to Alaska—started to say to Texas, to attend a Homeopathic convention; "the gentleman from Louisville," who can write a poem, make a speech, and kiss a baby with surprising grace and charm of manner; our handsome president from Little Rock; the quick-witted, sharp-eyed, busy little man from Lexington; the venerable, honored, and beloved Halcombe, of New Orleans; the never-to-be-forgotten Fisher, of the United States, and a few others not recalled as I pen these hurried lines. This list includes the men who attend meetings, who send papers, who write letters, and who can always be depended upon to work for the success of a meeting. I hope to be able to add many names to this list before our gathering at Memphis.

The excuses which were made by delinquents last fall were very amusing. One man didn't like the policy of THE SOUTHERN JOURNAL OF HOMOEOPATHY; another was displeased with the *personnel* of the local reception committee, which was not surprising, considering the fact that the committee objected to some of the flimsy attempts made to break up the Louisville meeting; another was "too busy trying to elect Harrison president," and is now happy in seeing President Harrison; and finally, one party thought he "might possibly change his mind at the last moment and come in spite of himself."

Memphis is nearly midway between Louisville and New Orleans; it is a railway centre with lines of iron running in every direction; it is an exceptionally cen-

tral point, and we do expect a large number of physicians to be present. To be a little personal, there are four respectable cities in Tennessee, Memphis, Nashville, Chattanooga and Knoxville—each one of which ought to send some representation to the meeting. Louisville and Lexington in Kentucky, will send delegates. Arkansas ought to furnish some half dozen members, if not more, and amongst them my old friend, Dr. Wells Le Fevre, lately of Chicago, who has located at Hot Springs, and who must by all means meet his professional brethren at Memphis in November. Mississippi must break the record and send some delegates. Louisiana, of course, will do the right thing. Texas will, as usual, come to the front handsomely. We all want to meet and know our new editor, and Dr. Joseph Jones may accompany his editorial friend without seriously affecting his good standing in the association.

Fellow-members, there is neither right nor reason in suppressing the fact that there is an astonishing apathy existing among those who ought to have the interests of the southern association seriously at heart. We need a journal and we need organization. Dr. Clifford has given us the former, and we must work individually for the latter. There is going to be a meeting at Memphis in November; it matters not if only six physicians are here to attend its sessions.

There is no doubt on that score, there will surely be a meeting. That much assured, let us make it as large, as interesting, and as successful as possible. Very soon our state societies will begin to hold meetings. Let every one of those societies appoint delegates to Memphis in November. The work of agitation cannot be begun too soon.

Very Sincerely,

HOWARD CRUTCHER.

To the Profession.

It has been suggested by many to change the date of the State society meeting from May 7 and 8 to Tuesday and Wednesday, June 4 and 5.

The reasons advanced for this change are, that the "Spring Palace" opening at that time, round-trip tickets can be purchased for one fare, and the grand exhibition and the many attractions and inducements offered by the citizens of Fort Worth upon this occasion, etc.

It is therefore ordered that the date for the State meeting be changed as suggested above.

A large attendance is expected.

Faternally yours,

FRANK HINES, President,
Corsicana.

G. G. CLIFFORD, Secretary,
San Antonio.

His Jaquet.

THE SOUTHERN JOURNAL OF HOMEOPATHY died of inanition, ostensibly, but most likely it *crowed* itself to death, like Robinson's rooster. With its last gasp the plucky little bantam complained that there was "not sufficient *material* in Texas to support a journal," and after a feeble attempt to appear cheerful and resigned it gave up its little ghost, folded its little wings, and departed this life. Seriously and with all due respect its editor and manager is a man of pluck, energy, enterprise and some intelligence, and had these qualities been brought to bear in a more worthy cause he would doubtless have achieved success—but—homeopathy! Bah! nonsense, moonshine. Fisher plied it for all it was worth, and with the above result. California is to be blessed with this important individual's presence, we believe, henceforth.—*Daniel's Texas Medical Journal*.

The greatest survival of bigotry in these United States of America, is the man who edits the "Daniel's Texas Medical Journal." If bigotry was the only indication, this self-imagined deity could be said to be an idiot, but when he so surreptitiously slanders another, knowing that the party against whom the invectives are uttered can not reply, the man should be called a *garrulous perturbator*, and consigned to a compartment in the *hotel across the river*. 'Tis true California is to be blessed with Dr. Fisher's presence and it is a crying shame that the great state of Texas is blessed with the editor of "Daniel's Journal."

Selected Opinions.

DEAR DOCTOR:—Some one sent me a copy of the Cincinnati Medical Journal, March, 1889, from which I clipped the following choice morsel:

I diagnose a case of overflow of the gall bladder. The gentleman, to borrow one of their common phrases, is decidedly very bilious.

If I might be allowed to do so would suggest that he take a good dose of Ol. Ricinus Communis, followed by three comp. cath. pills. So as to completely eliminate all the morbid material. E.

Dr. Daniels had better try his hand again and see if he cannot come a little nearer the truth. I know he can. You are not as big a *burro* as the article makes you out to be.

Question; "What is the first duty of man?"

Answer: "To attend to his bowels."

For six hundred years Rome existed without physicians. Within six hundred years after its first physician the Roman Empire had ceased to exist.

Medical Legislation.

To the Herald: Having been a close observer of the various attempts to prevent medical imposition and to elevate the medical profession by special legislative enactments, I must make some comment upon the discussion lately had upon the subject at our capitol.

First, I would remark that the movement in favor of special laws has never been from the people, those who are the victims of malpractice and imposition. They have no confidence in medical boards, but would like some kind of medical registration calculated to elicit the truth as to what each physician has done to qualify him to care for the sick and the injured.

Second, I remark that every move for the creation of boards of medical censors has been by medical men who either have failed to secure enough clients among the sick or are itching for some political preferment that shall place them above their fellows and give them a dignity and influence they have failed to win by individual merit or endeavor. For 20 years each returning legislature has been worked upon by men disappointed on the field of practice or ambitious for official distinction.

Third, I remark that such boards were tried and pronounced a failure in New England, New York, and New Jersey more than half a century ago. They were found not only to do no good but to effect positive evil by efforts to keep the art of healing in old ruts and to prevent improvements, which they always characterized as innovations and irregularities.

The efforts to revive such boards have been favored by army surgeons, who imagine there is great virtue in the red-tape methods of the war. While examinations were of some use in determining

who might be competent to practice surgery, they could show very little as to skill in the medical care of the sick.

So far as standards were possible there was some good in the authoritative examination and no farther. In the use of curative measures, beyond the simply mechanical, there never have been standards and probably never will be, with which the state can force a compliance on the part of medical practitioner; and, hence authoritative censorship is not only absurd, but productive of evil. It is an interference with individual rights, for which there is no corresponding good. It restrains the inventive genius of the profession and forbids original and better efforts in behalf of the sick.

Experience in the older countries, where standing armies and military surgeons dominate everything, and experience in our own country fail to give one particle of testimony in favor of the censorship now being urged upon Tennessee.

The argument that our state must have such a board because others have is of no force. Georgia had one and abolished it. Arkansas had one, but it is about to be abolished.

The assertions that medical imposters are being driven to Tennessee because we have no board is not true. Hardly a single itinerant doctor comes here without a diploma that a state board would have to endorse. The most dangerous quacks have diplomas. Such a complaint comes only from those medical men who need clients, and who imagine the legislature ought to protect them against competition.

And the idea that doctors should be examined and have license, as in the case of lawyers, has no force, because there are constitutions, and statutes, and supreme court decisions sufficient to make a standard of qualifications for the lawyer; and

because in the practice of law there is no diversity of schools and differences as to ways and means.

Personally I care not how many special laws are enacted, nor how many boards are created for the pretended regulation of medicine. I fear none of them for myself or the school of medicine I represent, because we have not neglected college training and are able to exhibit diplomas equal to the best, but I would be sorry to see the old Volunteer state tumble into a trap set by selfish and designing men, a foolishness that every legislature at our capitol, in all past time, has had the wisdom and rare good sense to reject.

I know it is becoming somewhat fashionable with many to resort to the state for every good thing desired and for the prevention of every evil feared.

A board to regulate the doctors should, with equal propriety, be followed by one to regulate the preachers. In a little while the people would be expected to eat, drink, sleep, smoke, take physic, say prayers, live, die and go to heaven under the supervision of state boards and in accordance with prescribed methods.

That would be a red-taped millenium sure enough.

J. P. DAKE.

The Centennial Festival.

TO BE OPENED FOR THE BENEFIT OF
HAHNEMANN HOSPITAL CHARITIES.

A centennial festival for the benefit of the free beds and new maternity of the Hahnemann hospital will be given during the month of April at the Pottier & Stymus building, No. 489 Fifth avenue. A great variety of attractions will be offered, including entertainments and performances during the afternoons and evenings. Matinees for children will be given on Wednesdays and Saturdays.

It is designed to have a "Martha Washington Drawing Room," with an interesting collection of relics of the revolutionary period. Loans for this collection will be received and protected. A club room, with daily papers and billiards, is also to be provided for the use of gentlemen who may patronize the festival. A special feature will be a restaurant, on the ground floor. Donations will be received at the Pottier & Stymus building after April 1.

Money will be sent to rs. William Hegeman.

The festival will open on the evening of April 11 and continue daily from 11 a. m. to 11 p. m. until the end of the month. Following are the officers and managers:

President—Mrs. Chauncey M. Depew.

Vice-Presidents—Vice-President Levi P. Morton, Mayor Grant, Andrew Carnegie, Hon. B. Cornell, Elliott F. Shepard, Constant Andrews, Fletcher Harper, F. B. Coudert, Col. S. V. R. Cruger, Austin Corbin, Hon. Judge Hilton, Jesse Seligman, Gen. Thos. Hillhouse.

Treasurer—Mrs. William Hegeman, No. 43 West Fifty-fourth street.

Secretary—William J. Swan, No. 13 West Thirty-eighth street.

For suppression of the loebial discharges, scanty secretion of milk, rapid increase in the temperature and pulses of the lying-in woman, veratrum viride x to 2t will restore the woman in twenty hours.

The Western Exchange Bureau: Physicians', dentists' and druggists' locations bought and sold. Assistants, substitutes and partners furnished. Send two-cent stamp for the *Monthly Bulletin*. Sample copy of the *Medical News* free. Address H. A. Mumaw, M. D., Orrville, Ohio.

*An Epidemic of Colds.**Courier Journal, Louisville, March 28.*

Dr. A. L. Monroe, a gentleman who has devoted a great deal of attention to such subjects, was applied to for information, and replied as follows:

"In the first place, a cold is not caused by catching cold,' as generally understood, but by the person losing heat. That being the case, the more moisture there is in the air, the better conductor of heat it is, and, therefore, the more rapidly heat is conducted from the body. You see the point? A more vigorous circulation in a man's system is required in damp weather to maintain his equipoise than when the weather is dry. Damp, mild winters are more prolific of respiratory troubles, including pneumonia; than cold, dry winters, and to the influence of the damp air on the circulation is due, in a great measure, the state of affairs now prevailing."

Dr. Monroe recounted a theory which seems plausible and self-suggestive of a remedy or remedies:

"The fact that damp air is heavier than dry causes it to retain impurities to a greater degree—such as coal soot and dust—and damp, raw weather, accompanied by winds, keeps the air loaded with these impurities. Louisville is a large manufacturing city, probably the largest city depending upon bituminous coal; hence the air is always full of coal dust. In other cities, which depend on anthracite coal, natural gas or wood, such a condition does not exist. In Paris there is a law prohibiting the use of coal within the city limits, and it is a known fact that in that city there are but few respiratory diseases. One-half the deaths in this city are from consumption and pneumonia, while in New York and other large cities the percentage of deaths from

such diseases is a great deal less. Colds, catarrh, and such troubles, often leading to serious results, are largely due to the causes I have mentioned—the presence of soot and dust in the atmosphere. When natural gas shall have taken the place of bituminous coal in Louisville, and the city shall have provided for the sprinkling of her streets, even in the winter, if they be dusty, you will find that this heavy percentage of deaths from lung diseases will be much reduced, and Louisville, already celebrated for her health, will make a much better showing."

As to the ordinary, every-day cold, Dr. Monroe said:

"People do not catch colds when they are well, and colds are usually traceable to a disordered circulation, caused by dyspepsia, overwork, exhaustion or anxiety. As to whooping-cough, there is more of it now than I have ever known. It is a germ disease, and the weather is favorable for the spread of such diseases. A good plan for people who 'catch cold' is to bathe the feet and legs to the knees in cold water, and rub themselves with sweet oil every night. If they will do this they will never 'catch cold.' Or if they will take a drop of camphor on a lump of sugar every twenty minutes until they have taken four doses, when the cold first comes on, they will break it up. For people who have the facilities, I would recommend a hot bath and rubbing with olive oil."

The non-professional people seen were of one mind—they had colds, and thought everybody else had them, which seems to be the fact. Some complained of throat troubles, others of headache—in fact, almost all the symptoms of "bad colds" generally were present [in some form or other.

BRAIN is a mathematizing instrument.

"The Old Oaken Bucket."

A NEW VERSION BY PRESIDENT BAYLES, OF THE
NEW YORK BOARD OF HEALTH.

With what anguish of mind I remember my
childhood.

Recalled in the light of a knowledge since
gained,

The malarious farm, the wet fungus-grown
wildwood,

The chills then contracted that since have re-
mained;

The scum-covered duck pond, the pig sty close
by it,

The ditch where the sour-smelling house
drainage fell;

The damp, shaded dwelling, the foul barnyard
nigh it—

But worse than all else was that terrible well,
And the old oaken bucket, the mold crusted
bucket,

The moss covered bucket that hung in the
well.

Just think of it? Moss on the vessel that lifted
The water I drank in the days called to
mind;

Ere I knew what professors and scientists
gifted

In the waters of wells by analysis find;
The rotting wood fiber, the oxide of iron,

The algæ, the frog of unusual size,
The water impure as the verses of Byron.

Are things I remember with tears in my eyes.
And to tell the sad truth—though I shudder to
tell it—

I considered that water uncommonly clear,
And often at noon, when I went there to drink
it,

I enjoyed it as much as I now enjoy beer.
How ardent I seized it with hands that were
grimy!

And quick to the mud-covered bottom it fell!
Then reeking with nitrates and nitrites, and
slimy,

With matter organic, it rose from the well.
Oh, had I but realized in time to avoid them—
The dangers that lurked in that pestilent
draught—

I'd have tested for organic germs, and destroyed
them,

With potassic permanganate ere I had
quaffed.

Or, perchance, I'd have boiled it and afterward
strained it

Through filters of charcoal and gravel com-
bined;

Or, after distilling, condensed and regained it
In potable form with its filth left behind.

For little I knew of the dread typhoid fever
Which lurked in the water I ventured to
drink;

But since I became a devoted believer

In the teachings of science, I shudder to
think.

And now, far removed from the scenes I'm de-
scribing,

The story for warning to others I tell.

As memory reverts to my youthful imbibing

And I gag at the thought of that horrible
well,

And the old oaken bucket, the fungus-grown
bucket—

In fact the slop bucket—that hung in the
well.

—*Phrenological Journal.*

Home for Destitute Children.

ORGANIZATION AND OBJECTS.

The San Antonio Home for Destitute
Children was organized June 23, 1886, at
the Maverick hotel, in this city; was re-
organized and a new charter obtained
February 7, 1887. The objects of the
home is to care for all orphans and desti-
tute children committed to its guardian-
ship, and secure homes for them in Prot-
estant families only.

There are now 57 children in the home.
A kindergarten teacher is employed.
The little ones are kindly taught, and
their moral, intellectual and physical
training shows that marked improvement
has resulted from the influence of the
home.

Directors—Mrs. Kate Norton, presi-
dent; Mesdames Julia Belknap, Mary
Chabot, Adelia Cresson, Maggie Bell
Newton, Lizzie Kampmann, Mary Tal-
cott, Fannie Simpson, Annie King, Helen
Johnson, Lizzie Freeborn, Annie Leon-
ard and Helen Seeley.

Book Review.

Now comes Messrs. E. B. Treat & Co. of 771 Broadway, New York, and offers to the practitioners of progressive Medicine, for \$2.75, "The International medical Annual and Practitioner's Index."

The first part is devoted to the subject of "New Remedies, Mechano-Therapeutics and Electro-Therapeutics." In the second part is given, under the names of diseases, in alphabetical order, an account of everything new pertaining to treatment afforded by the literature of the past year. This is a ready reference work and is in its place on the physician's desk.

The twelfth edition of Kirke's handbook of physiology, is just out. This volume is very replete in every department. It is especially interesting, not only to the student but the physician in active practice. The practitioners of the day can obtain much valuable information respecting the diet of their patients, by a close perusal of the chapter upon "Food and Diet." The student can learn much more than formerly about the functions of the *spleen*. The publishers, Mess. Wm. Wood & Co., 56 and 58 Lafayette Place, New York, stand sponsors for the work.

The tenth, eleventh and twelfth parts of "Atlas of Venereal and Skin Diseases," comprising original illustrations and selections from the plates of the best scientists of America and Europe, are now presented to the profession by Mess. Wm. Wood & Co. These plates are very instructive and present to the mind at a glance what would take hours of hard study to master. The etiology, diagnosis and treatment of these diseases are fully given.

Sidney Ringer, M. D., professor of Principles and Practice of Medicine in University college, honors the profession with the twelfth edition of "A Handbook of Therapeutics." In this work more attention is paid to the indications for the use of the drugs in disease than on their physiological action. The insertion of a brief account of the symptoms of disease and the appreciation of objective and subjective symptoms and the application of drugs thereto, makes the work a very valuable adjunct to any physician. Mess. Wm. Wood & Co., are the publishers.

That's What It Means.

"Doctor, are you Mr. Jones' family physician?"

"I think I am; he owes me three hundred dollars."—*Puck*.

In a discussion on anæsthesia in obstetrics a doctor made a biblical quotation, "In sorrow shalt thou bring forth children." A woman physician retorted: "It happened only once that a man was in labor, and on the occasion the Lord put Adam in a deep sleep. Why cannot woman have a like advantage?"—*Medical Era*.

In the treatment of extensive burns Prof. Helmuth advises, after the time for lead, etc., the use of calendula in proportion of one part of the tincture to five of water as an application. It has, he says, not only a remarkable effect upon the healing process, but it has a decided tendency to lessen cicatricial contraction. He emphasizes, however, that the tincture used must be from the leaves alone, and that they must be well selected and the tincture carefully prepared.—*Medical Era*.

Must Obey The Law.*(Courier Journal, Louisville).*

A meeting of the physicians of the city has been called by Dr. J. M. Matthews, Chairman, for 8 o'clock this evening in the school board rooms at Centre and Walnut streets. In the call it is announced that the object of the meeting is to prevent the illegal registration of practicing physicians' certificates or diplomas, which, it is alleged, is now being attempted.

Under an amended act passed by the last legislature, entitled "An act to protect the citizens of this Commonwealth from empiricism," it is provided that all physicians must be registered after April 1, 1889.

The authority to practice medicine under this act shall be: (a) A diploma from a medical school legally chartered under the laws of this state. (b) A diploma from a reputable and legally chartered medical school of some other state or country, certified and indorsed as such by the faculty of a legally chartered medical school in this state or (a legally incorporated) State Medical Society. (c) An affidavit from the person claiming the same that such person is exempted from obtaining a diploma under section two of the act to which this is an amendment, and stating where he has so practiced;

Provided, That no college shall charge or receive more than one dollar for the certificate and indorsement required by this section.

Nothing in the act shall be so construed as to discriminate against any peculiar system or school of medicine, or to prohibit women from practicing midwifery, or to prohibit gratuitous services in cases of emergency, nor shall the act apply to commissioned surgeons of the United States army, navy, or Marine Hospital service.

It is the intention of the various medical societies in this city to prosecute to the fullest extent of the law all persons who do not register after April 1. The four medical societies of Louisville, the Kentucky State Medical Society and the Homeopathic Society, alone, are entitled to register physicians, but they have vested their power in Dr. J. N. McCormack, President of the State Board of Health, who will issue certificates for diplomas.

It is said that some of the resident physicians, who have no diplomas and who have not been practicing the requisite twenty-five years to be exempt, have organized themselves into a society, had it incorporated and are engaged in giving one another the necessary diplomas.

Dr. Wathen, who was one of the promoters of the new law, in speaking of the matter yesterday, said:

"The law is being evaded and the physicians should protect the people and themselves as well by organizing against these illegal registrations. Four physicians, not being able to secure diplomas, hit upon a novel way to evade the law. They organized and incorporated the 'Dasometric Society' with four members. They elected Dr. Landon Limerick president, and Dr. John Loomis, secretary. None of the four members have diplomas and none have been practicing twenty-five years, but the 'Dasometric Society' has issued a diploma to each of the four members, and upon these diplomas the four members expect to get certificates and by thus evading the law continue the practice of medicine, for which they are not qualified."

"Kali—Bi—in powders, my boy Jim has membranous cramp very bad. Or "Verbatum copy, of a note received a few days ago."

Cremation of Refuse.

Dr. S. S. Kilvington, President of the Minneapolis Board of Health, has made an exhaustive study of crematories, American and foreign; concluding that the choice lies unquestionably, for American cities, between the Engel, Mann and Rider patents, the first of which has been adopted, with certain modifications, by the cities of Minneapolis and Milwaukee. The cremating chamber is 33 feet long, 5 feet wide, and 7 feet high above grate, with a fire-box at each end, a superheated flue running beneath the ash-pit for the more perfect consumption of smoke and gasses. The refuse is carted into a story above the crematory, and dumped into it through verticle shafts; the best fuel kinds, such as dead animals, &c., being put upon the fire, and other matters distributed along the chamber.

An estimate of the expense of operating the Engle crematory in Minneapolis for a period of five days, during which the furnace was worked by three men entirely new to the task, two of whom were on duty by day and one by night, gives the following facts and figures:

CONSUMED IN FIVE DAYS:

Thirty-three horses, 59 dogs, 103 barrels of hotel and commission house refuse, 12 loads market offal, 70 loads manure, weighing in all over 200 tons. The total cost of labor and fuel for this period \$38.25, or \$7.65 per day, the entire weight of refuse being destroyed at a cost of 19 cents per ton. The ash deposited weighed less than 200 pounds per day. This test was for several reasons not a fair one. It is safe to say that upon an average run, over an extended period, 15 to 20 cents per ton of refuse would pay for the labor employed and the fuel consumed. The odors which arise from the direct burning of night soil, even without any special

precaution for the consumption of gases formed, are not so obnoxious as might be imagined, resembling the smell of burnt leather.—*Sanitary Era*.

The Forceps as a Cause of Idiocy,

The *London Lancet* gives a short account of the investigations of Drs. Winkler and Ballaan as to the effect of forceps upon the brain substance. They held a number of autopsies on idiots, in one of which they found marks of the forceps on both sides of the head corresponding almost exactly to the damage done the brain. Of ten idiots examined after death and twenty-five living, six had bilateral depressions in the skull. Drs. Winkler and Ballaan believe that depressions of the skull caused by forceps even when no fracture occurs tend to damage the cortical substance of the brain, and that this leads to general atrophy of the hemispheres, thus producing idiocy.

The exact degree of pressure that should be made with the forceps must be left to the judgment of the physician. It is a much easier matter to graduate the pressure before making traction than while traction is being made; for this reason a set screw in the handle is of great service to those who are not thoroughly skilled in the use of forceps. The base of the cranial cavity has been fractured in instrumental delivery. The investigations mentioned will assuredly do good in calling the attention of the profession to a possible danger that has heretofore received too little attention.—*Weekly Review*.

M. J. BLEIM, M. D.,

Office and Residence, 20 Travis St.,

SAN ANTONIO, TEXAS.

Scarlatina During the Pregnant and Puerperal Periods.

[Boxall, "Anales de Obst., Ginecop. y Pediat., August, 1888.]

Two classes of cases are considered of those pregnant and parturient women who show a predisposition to infection from scarlatina: (1) those in which infection is received before parturition, and during or after the same; (2) those in which infection occurs only at the beginning of labor. From an experience of sixteen cases it was deduced that scarlatina among the parturient occurs almost exclusively during the first week of the puerperium, and that in exceptional cases it may occur a little before the beginning of labor.

With reference to the predisposition of a pregnant and parturient woman to scarlatinal infection, and the reciprocal influence which exists between it and parturition, it was thought that a woman who was exposed to the disease might be infected during pregnancy, during parturition, or subsequently. Also that predisposition to the disease is greater a little after parturition and during the first week of the puerperium. If infection occurs during or after parturition the period of incubation will be short. If infection occurs during pregnancy, the period of incubation will be longer than normal.

The author found that there was an apparent analogy, with reference to the appearance of scarlatina, between parturition and the menstrual periods, and drew the following conclusions:

1. That the predisposition to infection, is greater a little before, during, or immediately after the menstrual period.
2. That infection which occurs a little before the menstrual period hastens the appearance of the menstrual flow.
3. That when infection occurs during

or shortly after a menstrual period, the latter will be shortened.

As to the clinical course of scarlatina during pregnancy and the puerperal period it was observed:

1. That during pregnancy the pharyngeal symptoms are not modified, but after parturition angina is infrequent.

2. If scarlatina occurs after parturition, angina may not be apparent at first, and even in the later stages it may not cause great trouble; in other cases the signs of inflammation may be alarming, or may even be absent until the second or third week of the attack. The cervical glands also may be swollen with or without any other trouble in the throat.

Concerning the influence of scarlatinal poison upon the progress of parturition it was observed:

1. When parturition occurs during the period of incubation of scarlatina it will follow its ordinary course, but the pains will have a greater influence than usual upon the mental condition of the patient; inertia will probably be present in the last stage of labor and will give rise to characteristic phenomena.

2. If parturition occurs during an attack of scarlatina, the pains will be feeble, inertia will be present, and there will be tendency to hæmorrhage.

The following conclusions are reached as to the effect of the scarlatinal poison upon the puerperism:

1. Involution of the uterus is retarded little if at all.
2. The very slight and transitory sensibility at the fundus of the uterus which is perceptible at the beginning of an attack is almost always due to increased sensitiveness of the pelvic organs, and rarely indicates pelvic inflammation.
3. If antiseptic precautions are adhered to, fissures which may have been sustained during labor will heal satisfactorily.

4. In some cases there may be an odor which is very disagreeable.

5. The lochia will be natural in character and will cease at the proper time, but in some cases this discharge will be very abundant and scarlet in color at the beginning of the attack.

6. The mammary secretion will be diminished in almost all cases, and in some cases will be suspended, on account of the scarlatina.

7. Nursing children show a particular predisposition to contract scarlatina when their mothers have it, and this is probably due to simple contact with their mothers.

8. Should scarlatina appear spontaneously in a given case during pregnancy, the *fœtus in utero* may or may not be affected.

9. If the mother is infected shortly before parturition, the foetus will in most cases escape at the time, though it may be infected after birth.

even wines, unless the latter are proved by chemical analysis not to contain salicylic acid.

7. Don't allow patients suffering from chronic interstitial nephritis to undergo any protracted mental or physical exertion or sudden strain; not even when there is but a trace of albumen in the urine.

8. Don't mistake persistent, intractable vomiting (even without oedema) for "dyspepsia." Examine the urine for albumen, and estimate the quantity of urea.

9. Don't mistake cardiac degeneration, dilatation and failure for a "conservative hypertrophy" in the course of Bright's disease.

10. Handle crude drugs and low potencies with caution in all kidney diseases; this applies especially to salts of mercury, potassium, lead; to salicylic acid, alcohol, and *particularly to opium*.—*Medical Visitor*.

Ten "Don'ts" in Renal Diseases.

CLIFFORD MITCHELL, M. D.

1. Don't give hypodermic injections of active medicinal principles to patients suffering from chronic diseases of the kidneys.

2. Don't give pilocarpine at all in kidney diseases.

3. Don't give mercurius corrosivus low and persistently in cirrhotic kidney, when the latter recurs in rheumatic patients, or is due to lead poisoning.

4. Don't give iron or "tonics" in typical cases of chronic uræmia, Don't give iron in cirrhotic kidney in nervous patients.

5. Don't give hot baths after renal activity is restored in acute nephritis.

6. Don't allow a patient suffering from kidney disease to take salicylic acid or salicylates; don't allow him beers, or

Music in Medicine.

From the time when medical knowledge was first embodied in rules of practice, and probably from a much earlier period, music has held a recognized place in the treatment of disease. In no classes of diseases, however, are we likely to derive so much benefit from the use of so pleasant a remedy as in those affecting the mind itself. In melancholia and allied states of depression its value is generally admitted in our own day. Ancient practitioners were also cognizant of its usefulness in this respect. We must all have felt how suitable is its infinite variety and facility of expression to the changing moods of the sane, and it is, therefore, the less difficult to understand how straying minds are pleased and settled by its charms.—*London Lancet*.

Homeopathy in the Treatment of the Insane.

The following figures, from reports of asylums for the insane, are from the president's address, delivered at the recent meeting of the State society of Pennsylvania. The accuracy of the figures cannot be questioned: The asylum at Harrisburg, Pa., has an average death rate for five years of 7.40, and percentage of recoveries of 4.37. Norristown, Pa., death rate, 7.59, recoveries, 5.85. Danville, Pa., death rate, 4.82; recoveries, 4.96. Dixmont, Pa., death rate, 8.33; recoveries, 5.94. None of the foregoing are under homeopathic auspices. The Middletown, N. Y., asylum (homeopathic) has a death rate for same period of 4.26, and recoveries, 15.10; Westborough, Mass. (homeopathic), death rate, 4.40, recoveries, 12.79; Ionia, Mich. (homeopathic), death rate, 3.60, recoveries, 12.00.—*Medical Era*.

Thirst in Young Infants.

It is a mistake to suppose, says an exchange, that because milk is a liquid food it is at the same time a drink which is capable of satisfying the thirst of infants. Although milk appeases hunger, it makes thirst more intense after it has remained some time in the stomach and digestion has begun. It is thirst which causes healthy, breast-nourished infants to cry for long periods of time in many instances. There are many cases of indigestion due to weakness or insufficiency of the child's gastric juice which would be greatly benefited or even cured if the child were allowed an occasional drink of water.—*Annals of Hygiene*.

Dr. J. Cresswell Lewis is now located at No. 9 Soledad block, San Antonio, Texas.

Abuse of the Brain.

It is well for us to know that the emotions cause more unhappiness and crime than any other function of the brain. It is its emotions that wear away the brain, and not intellectual work. Very few people suffer from intellectual work, and if my memory serves me, I do not recollect ever having a mathematician for a patient. It is not intellectual work that causes nervous dyspepsia, but the emotions, such as anxiety, fear, sorrow, and love.—*Dr. Wm. J. Hammond*.

THE medical journals are the beacon lights to guide the voyager aright. They indicate the navigable current and guard him from the fossilizing centers. They light him in safety to the treasure-laden shores of the long-gone past. They promote for him a safe return. They beckon him toward the future, on, on, and onward still. By their steady gleaming they inspire him with hope and courage; stimulate his fainting spirit; cheer his weary heart, and lead him successfully past the thousand dangers that threaten to o'erwhelm his intellectual life.—*Medical Current*.

"It is the duty of our profession," as Weber insists, "to teach the public that it is a great mistake to think that the invalid and his friends are able to manage the dietetic and hygienic treatment of consumption, or that it is enough to go for a season, or for several seasons, to a certain climate health resort, and that the climate itself is able to cure phthisis without the assistance of local doctors. Many valuable lives are lost through this error, even under the most favorable climatic circumstances—lives which might be saved under strict medical guidance."—*New York Med. Jour*.

DR. J. P. COBB: I have never seen the eruptions of scarlatina and measles appearing simultaneously. I have seen the eruption of scarlatina follow within a week, the disappearance of the rubeolous eruption, demonstrating to my mind that both affections must have been incubating at the same time. I had presumed that the efflorescence of the one was in some way inhibitory of the other.—*Clinique*.

IN TOOT-PULLING.—Drs. Henoque and Fredel, in a communication made to the Biological Society of Paris, state that the extraction of a tooth may be rendered painless by spraying the neighborhood of the external ear with ether. The anæsthesia of the tregeminus so produced extends to the dental nerves, and thus renders the production of the general anæsthesia needless.—*Pacific Record*.

A NEW CURE FOR THE SINGULTUS.—Dr. Dresch of Faix, France, describes a new and sure method of curing hiccough. The sufferer closes his ears with the tips of his fingers, making firm pressure. At the same time he is given water to drink in small swallows. The hiccough ceases instantly.—*Bulletin General de Therapeutique*.

The danger-signal is ever fluttering higher and higher in this great age of everything. The *Sanitary News* has discovered that there is danger in the postage-stamp. A man suffering from disease writes to you and encloses stamp for answer—which, by the way, many a man in health forgets to do, and licks it slightly to make it adhere (sometimes to such effect that the stamp is useless), and you, in turn, lick it, and there you are! And as for money: "If one could see through what hands money has passed,

they would hesitate before using such a third hand," is the slightly ungrammatical state of the case. "Silver is as bad as paper money," etc. Nevertheless, and notwithstanding these dangers, we are inclined to believe that men, and even dainty women, will continue to risk the danger, and be rather glad to do it. For our part, we wish to say that the fear of spreading contagion need not deter any of our subscribers from sending us that dollar due; we'll chance it.—*Homeopathic Recorder*.

In an acute inflammation of the tear sac, the abscess should not be allowed to burst externally, as this forms a fistula lachrymelis, which is often exceedingly difficult to cure. When such happens the natural course of the discharge being established, the fistula must be healed by stimulating its edges; if they have become covered with skin, pare the edges and unite with a stitch.

At the height of the abscess it is advisable to open the canaliculus to let pus out that way; it should be kept open with probes. If the skin over the abscess is in imminent danger of bursting it is better to open the abscess with a knife than allow it to burst; then apply hot lotions and encourage suppuration. As soon as possible heal up the fistula and get the pus through the opened canaliculus. Ice water, lotions and the indicated remedy will often cut short an attack if used in the beginning.—*Investigator*.

Prof. Phil Porter has returned to Cincinnati, his future home, after spending the winter in southern latitudes. We are indeed glad to hear that our great gyneologist has entirely regained his health, and earnestly hope that "man's birthright" may in future be his boon.

Pot Pouri and Personal.

"You may break, you may shatter the vase if you will,
But the scent of the roses will hang round it still."

The Missouri Institute convenes at Springfield, April 23rd.

The Kansas State Society meets at Emporia, May 1st and 2nd.

PHILOSOPHY, the mind of man as it it investigates subjective phenomena.

The California State Society holds its annual meeting at San Francisco, May 8th.

A clinical association has been organized by the homeopaths of Southwestern Wisconsin.

'Tis a mistake about Prof. Porter giving up the editorship of the Homeopathic Journal of Obstetrics, etc. The doctor still holds the reins.

Dr. J. A. Dickey, late of Weatherford has removed to Fort Worth, Texas, and is located in Postoffice Building. Success to you doctor, in the Prairie city.

"I will say that I do not believe it is possible to predict post-partum hemorrhage with any degree of certainty, and therefore, any drugs prescribed upon anticipated physiological indications will, in most instances, at least, do more harm than good."—Dr. Cowperthwaite.

A correspondent writes: "A slave to no creed, a supplicant to no sect," and on this line have I led on through evil as well as good report, and by the grace of *Æsculapius*, cheered on and inspired by the cosmopolitan spirit of Hippocrates, I expect to appear as best I can, hypocritical cant, superstition and bigotry to the end.

When I consider what the education of a doctor entails, what endless study and investigation, what patient labor; when I reflect upon the continual risks that he must take, the continual self-control that he must have, balanced by continual compassion; when I remember how he is ever contending in a face-to-face and hand-to-hand encounter with disease and death; I think that he should be an industrious and thoughtful, a brave and noble gentleman.—A. B. WARD.

The doctor made reference to the great success that has followed the homœopathic treatment of this disease, note being especially made of the fact that the closer the symptoms were followed in prescribing the indicated remedy the lower was the mortality. Dr. Fisher is stopping in the city for a short time, after which he expects to sail for Europe in investigation of hospital methods and matters medical. Upon his return, the doctor will settle upon the Pacific coast, and the students of this college hope he may be spared for a long life of usefulness in his new field of labor. It is also to be hoped that at some future day the students may again have the pleasure of a visit and talk such as has been the privilege of the present senior class.

The supreme court of the state of Indiana has decided that damages for malpractice must be collected during the lifetime of the physician; they cannot be collected from his estate. In this instance a suit can not be maintained after the death of the party sued.

ADVERTISE IN AND

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THE JOURNAL.

Southern Journal of Homeopathy.

NEW SERIES
No. 4.

San Antonio, Texas, May, 1889.

OLD SERIES
No. 66.

♦ ♦ Editorial ♦ ♦

Fellow Homeopaths.

On the 4th and 5th of June you will meet at Fort Worth for the purpose of helping one another with your counsels. To impart to your brother what progress you have made within the last year, to give all the benefit of your experience in the field of disease. Let all come prepared to lend their aid, whatever it be.

Again let the legislative aspect now confronting you be an incentive to urge you to be present at this meeting. The "regulars" are going to petition the next legislature to enact certain medical laws to inure to their sole benefit. They realize the encroachments true medicine is making; they see that the day is not far distant when the banner of *similia* will wave aloft over the domains they now occupy. To check the rapid strides you are making these would-be "regulars" are going to throw every obstacle in the way they can. They claim, and it is only a claim, that their ranks number 4000 in this state, all belonging to the *association*, yet only 150 answer to the bugle call. These 150, however, arrogate to themselves the right to dictate to practitioners of the state in general, who

shall or shall not administer physics within the confines of Texas.

Our legislature is composed of men of too much intelligence to receive the dictum of these men. An *ex parte* representative might be received, and then the blame would fall upon you. It is your duty to have our cause placed fairly and fully before the legislators and there is no doubt about the verdict being in favor of Hahnemann's doctrines. These facts considered, and a desire on your part to see true medicine succeed, and you will be present to give your aid.

Texas "Regulars."

Our "regular" brethren met in solemn conclave in the historic city of San Antonio the last week in April. There were about 150 of them present and they were a motley set. Their president, poor man, knew all that is or was to be known about the doctrines of Hypocrates and imparted his entire knowledge to those of his brethren who attended the convention in two addresses of one hour each. He knew all about the different schools of medicine, and with one or two co-workers posed as the oracles of the meeting. He warned his disciples to throw up barriers around themselves, and they should remain like a Chinese wall to all adventurers." This they have

done and that is a reason why they are fifty years behind scientific medicine. The doctor wants a strict code of ethics, and says: "The abolition of the code of ethics would level all distinctions between scientific medicine and the various sectarian pathies, and the shadowy and delusive system." The doctor has not much confidence in the hold his schism of medicine has upon its subjects. He fears that the *gods* might lose their sway, if the rays of true light be permitted to enter the darkness, hence it is he wants the *Chinese wall* built and let darkness reign. Again he intimates aright that his subjects might be elevated to the ranks of scientific physicians, in his remark "between scientific medicine and the various pathies." He is aware of the fact, that Homeopathy is the only scientific practice and his doctrine a pathy. Investigation will lift the veil from their eyes, and then the work of desertion will deplete their ranks, and demoralize their theories.

Seek and Ye Shall Find.

A quarter of a century ago a fair-minded person, honestly investigating after truth, might have made the mistake of denying the virtues of the doctrine of *similia*; but we do not believe it possible that such can now be the verdict of any one of ordinary intellect and unbiased mind—if the subject is given an "impartial trial" before the court of *reason*—for it cannot be presumed that the many persons confessing conviction of its efficacy, are either dupes of the designing few or of such stupid brain as not to know good from bad, to say nothing of the many great and true men who are its apostles and advocates, to say nothing of the many persecutions it has undergone from its enemies, or the severe tests and

competitions it has had with the older and long approved methods of curing the sick.

These thoughts are the result of our having noticed through the press that in America's metropolis the grandest fair, festival and bazaar ever held in this country was in progress last month—the proceeds to aid the Hahnemann hospital in carrying forward the good work of its mission and to spread more broadcast the seeds of knowledge so nobly begun.

To the ladies of New York suffering humanity is indebted for so generous an undertaking.

And perhaps it will not be out of place to say that Mrs. Chauncey M. Depew is president of the hospital; that among the most ardent and hardest workers of these ladies are Mrs. Depew's mother, Mrs. Hegeman, Mrs. William H. Wilson and Mrs. Geo. William Ballou. On the executive committee we find Mrs. Cleveland, Mrs. Russell Sage, Mrs. Martha Lamb, Mrs. A. B. Cornell, Mrs. A. B. Darling, and many other of our own nation's and the world's most honored names.

These ladies not only lend the influence of their names and positions to the enterprise, but work hard for its success, devoting their time and money to the cause. And why? Because they believe that the world and its needy could not have charity bestowed to a better purpose than the erection and maintenance of a homeopathic hospital, where the poor can have an asylum and obtain medical aid in their hour of need—by the method which their judgment teaches them is the true science of healing.

And now, who will venture to say that these ladies are either dull of mind or dupes of the designing leaders? Who will say that these ladies do not know what they are doing? The reason why

we have so many bigots is because of their failure to seek the truth, and among those who pretend to seek it we find "those who go fraud-hunting, bring home plenty of conceit and vain glory in their game bag, but seldom a feather of truth."

Little Pills.

To the uninformed it seems singular that the Homeopathic physician purchases his "little pills" by the pound, puts them in small vials and issues them to all his patients indiscriminately, to cure "all the ills that human flesh is heir to." It is for the benefit of such persons that this information is written:

Those "little pills" are made of chemically pure sugar of milk, which have no medical properties whatever, and they are porous, so as to absorb and become saturated with any liquid that is poured upon them. Your doctor fills the vial with *pills* and then pours on them such medicine as your case requires.

It would be well for the profession to let their patients see them saturate the pellets. It would do good in the way of disseminating information.

An Interesting Case.

The legislative committee of "The Texas Medical Association" passed through the period of gestation, in various parts of the state and was confined in San Antonio the latter part of April. Labor began at 10 a. m., on the 24th ultimo, and lasted forty-eight hours. This committee has been in *labor* before, and the tediousness of parturition was attributed to the *greatness* of the product. The father of the committee was proud of the progeny and brought forth a lengthy report to convince his brethren of that which their eyes saw not.

Notwithstanding all the eloquence and

divers other influences brought to bear, those present were of the opinion that the result of the *labor* was an abortion, and assigned the following errors: The report is very verbose and too theoretical, it is antique and altogether impracticable—it is a dictum and an unfavorable comment upon public intelligence, and the intelligence of our law-givers in particular. It is a mis-statement of facts; it is impolitic and was framed more in a spirit of egotism than for the profession's good.

News and Comments.

There appears to be no end of controversy over the action of the American Institute in regard to *The New York Medical Times*. This matter ought to be settled without much trouble. If *The Times* is a homeopathic journal, its place is properly in the ranks of periodicals advocating that system of medicine. If the paper is not in sympathy with the objects of the American Institute, its self-respect should prompt an immediate withdrawal from a society which is designated by "a peculiar title."

From *The Chicago Herald* it is learned that the Illinois State Board of Health has been strangled by the action of the legislature in cutting off the board's appropriation. It is possible, and likely true, that Dr. Ranch and his associates have at times been somewhat arbitrary in their manner of dealing with quacks and noted imposters; but this is no excuse for the action of the legislature, which appears to be utterly indefensible. Questions of taste and propriety aside, it is granted that legally qualified physicians may advertise their skill and gain thereby all possible revenue; but pretentious scoundrels and well-dressed, smooth-tongued dead-beats ought to be driven

from business, just like rascals in other walks of life. Sound public policy requires the closing of gambling houses and forbids the sale of liquors to those of tender ages; and our law-makers ought to deal with charlatans on the same principle.

The interminable quarrel between the advocates of low potencies and the friends of high dilutions should give way to something of the nature of scientific discussion. It is an undoubted fact that cures are wrought by every variety of potency, and the only way to decide such a question is by practical experiment. Zealous men will do a great deal to advance the simple truth by a plain statement of facts without so much involved philosophy. The work of the late Dr. Rollin R. Gregg on diphtheria is a shining example of a compilation of facts. The low dilutionist discredits Dr. Gregg's statements. In turn, the low dilutionist is set upon and devoured by the allopathist.

An old school periodical asks if it is not "time to consider the advisability of giving smaller doses of mercury in the treatment of syphilis." We think it is. If there is one disease in which drugs have done incalculable mischief, that disease is syphilis. It is true that mercury is much less abused than formerly, but there is still room for vast improvement, even among physicians of the new school, who appear to emulate their allopathic predecessors in the matter of material dosing. It is an astonishing fact that considering the tremendous advantages of the homeopathic treatment over all other treatments, very few men are acquainted with its application. This is very odd.

A gentleman connected in an intimate official capacity with a so-called medical

college wants to know "how many students would be shut out of college by a rigid enforcement of a statute requiring a good moral character?" It is impossible to say just how many, or what per cent., but certainly a good many young men would come to grief. By the way, does anybody know, or can anybody guess, how many students would be excluded from our colleges by a rigid enforcement of a law requiring applicants to read and write the English language?

The Chicago Homeopathic Medical College has lengthened its term and raised its requirements for graduation. This is exactly as it should be, and the time is coming when the diploma mills of this country will be placed under sufficient pressure to insure some education that will educate. Our present "system" of medical education could hardly be more shameless than it is at present.

SIMILIA.

Sleeplessness.

It is a fact, however, that even men who think they suffer from sleeplessness do not lie awake half so long as they imagine they do. When a man says to me, "I did not close my eyes once all night," I know he lies. Not intentionally, of course; he thinks he was awake all night; the probability is that he did not get to sleep until two hours after his regular time, and it seemed an age to him. Really it isn't often that a man lies awake the whole night through. I am not a physician and cannot speak by the book, but I believe that men fib about their sleepless nights more than any other ill to which our weak humanity is heir. Now, take your own case; you remember the last time you lay awake all night, don't you? Yes, I see you do. Well, don't you remember that same night you heard the clock strike two, and then the next time you heard it, it struck seven? Yes? I see you do. Well, that's one of the mysteries about insomnia that is difficult to explain. —[Robt. J. Burdette in *Boston Journal*.]

♦ ♦ Surgery ♦ ♦

The Radical Cure of Varicocele by Sub-Cutaneous Ligation.

BY M. J. BLIEM, M. D., SAN ANTONIO.

For The Journal.

The radical treatment of varicocele not so many years ago was considered a capital operation. The open operation by excision was excessively severe and unfortunate in its results. So much was this the case that it was almost impossible to persuade a surgeon to undertake its management. I remember, while an hospital interne, I brought a friend to my attending surgeon, and he was one of the most skillful I ever knew—to consult for varicocele. He had suffered much with it, had tried much for it, and all to no purpose. For love nor money could we induce my surgeon to undertake an operation; he could simply advise the continued application of hope and a suspensary!

But within the last five years a very simple method has been introduced with great success. True, under modern antiseptis, even the cutting operation may be safely done; but with this simpler and safer way to aid us, we need seldom resort to the severer operation. One is surprised too, that so easy a method as tying the veins sub-cutaneously was not adopted long ago. In the last edition of his work on genito-urinary diseases, Keyes gives very clear and full directions. A very satisfactory account of the operation is given by Prof. Shears in a clinical lecture on varicocele as published in the last *Clinique*.

Of course, we all know that varicocele is not a serious disease—often, indeed, it gives rise to no appreciable symptoms. In many cases what symptoms do arise

can be held in abeyance by a support. Nevertheless, it is mostly young men who are afflicted with varicocele and young men usually worry about it—as they do about all sexual affections—out of all proportion to its importance, and claim for a cure. Frequently, too, the aching and drawing pains in the back and groins are very distressing to those much on their feet. By means of sub-cutaneous ligation we can easily, safely, and surely relieve them.

The procedure is briefly as follows: The patient stands before the seated surgeon, so that the veins may become fully distended. The mass is taken between the fingers and thumb of the left hand (for the left side) and by manipulation the *vas deferens* is separated from the varicose vessels; it is readily distinguished by its hard cord like feel and by slipping easily out of the grasp of the fingers. Usually it lies to the inside of the vessels, but not infrequently we find a testis turned upside down, in which case the *vas deferens* lies to the outside. Having separated the *vas deferens* and thus holding it aside, a needle, armed with aseptic silk, is passed through the entire thickness of the scrotum, from before backward, passing between the *vas deferens* and the varicose vessels. The needle emerges at the back, one end of the silk is drawn through, while the other is for safety, held in front by an assistant. The needle is again entered at its exact point of exit and carefully threads its way under the skin and around the veins to the exact point of entrance in front. Here it emerges, and the loose end of silk is drawn after it. The patient will then lie down. All that remains is to tie and cut short. Keyes uses two straight needles, but the ligature can be passed just as readily in the way described with one ordinary half or full-curved needle.

As the aseptic ligature is allowed to remain and become encapsuled, most surgeons pass only one. Catgut is not suitable, as it is liable to absorb too soon and allow the veins to re-open. Most patients become rather faint while the cord is being manipulated and the needle passed; the tying of the knot is very painful, but happily of brief duration, and it is very rarely necessary to administer anesthetics for this part. In a few cases I have seen such collapse from the first part alone as to make it advisable to wait some time for reaction before tying or administering an anesthetic. Patients usually get up the next day and suffer but little pain after the first half hour. I generally advise them to wear a suspensary until the swelling is reduced. The scrotum regains its normal size in from six to eight weeks.

As conducing to the fullest success of sub-cutaneous ligation for varicocele it is necessary to attend to details, as

1st. Observe *strict antiseptic precautions*; shave and disinfect the scrotum. The silk should be boiled in a 5 per cent. carbolic solution and retained therein until used. The needle and hands should be made aseptic and in passing the silk great care should be taken not to drag it over septic or unclean garments, nor should it be handled by the unclean hands of assistants.

2nd. Be sure to select stout silk—test it before preparing it. To have it break while tying is very annoying to the surgeon and disheartening to the patient.

3rd. On passing the needle through the scrotum, avoid cutaneous veins. While encircling the veins sub-cutaneously, hug the skin closely.

4th. Tie a single or reef knot, tie steadily and not by jerks. The double or surgeon's knot slips too hard and is too bulky.

5th. Cut the ends as short as may be safe, then lift the dartos and be sure the knot disappears under the skin. If any of it remains exposed you may get supuration and finally be obliged to remove the ligature. It is well, finally, to seal the wounded point with a solution of iodoform in collodion, one part in ten. No further dressing will be needed if all goes well.

The Institute Meeting—Letter From the President.

MIDDLETOWN, N. Y., April 15.

To the Members of the American Institute of Homeopathy:—

• Your president sends you greeting, and wishes you all to remember that the annual session of the Institute will be held at Lake Minnetonka, in the State of Minnesota, beginning on the 24th and continuing until the 29th day of June, 1889. We urge upon every member the duty of attending these annual gatherings of our national organizations, and we promise both pleasure and profit to all the members who assemble in June next upon the banks of that beautiful and historic lake—the pride alike of ancient Indian and modern American.

What we need is an earnest, enthusiastic and rousing gathering of the friends of Homeopathy in order that the dignity of our cause may be enhanced, in order that the virtues of Homeopathy may be better known, and therefore better appreciated; and in order that the blessings which arise from the methods we have adopted may be as widely disseminated as possible among the people.

We ask all the members in the west to rally at Lake Minnetonka, because they may thus demonstrate the value of holding meetings in that locality. We ask all the members in the east to visit the west and to show their appreciation of

their western brethren, and of the hospitality and cordial welcome which they will receive in the State of Minnesota. We ask the brethren from the south to go up during the hot month of June from the torrid breath of the southern slopes to the cool and refreshing breeze of the great north wheat state. We ask the members who dwell upon the Pacific slope to come east and enjoy once more the friendship of former days.

We especially urge the chairmen of the various bureaus to work with vigor and energy during the next two months, for the purpose of insuring a large number of valuable papers to be read at the meeting. And we also urge upon the various chairmen the propriety and the duty of securing these papers as soon as possible, in order that a careful and full synopsis of each essay may be incorporated in the report which each chairman is expected to make. We expect all who are interested in our cause to do their utmost to make the next meeting of the American Institute an assured and triumphant success. "Naught more we ask nor less will have." SELDEN H. TALCOTT,
President.

Intoxication.

It is claimed that half a teaspoonful of chloride of ammonium in a goblet of water will almost immediately restore his faculties and powers of locomotion to a man who is hopelessly intoxicated.—*Medical Annals.*

The Western Lxchange Bureau: Physicians', dentists' and druggists' locations bought and sold. Assistants, substitutes and partners furnished. Send two-cent stamp for the *Monthly Bulletin*. Sample copy of the *Medical News* free. Address H. A. Mumaw; M. D., Orville, Ohio.

♦ ♦ Eye and Ear ♦ ♦

Iritis.

This dangerous and usually (though not always) painful affection of the eye is frequently observed by the general practitioner, especially during the wet and cold months of the year, and is probably as severe a test to his professional ability and his nerves as any other disease with which he has to cope. In many cases the physician is not consulted until irreparable injury has been done, and as the patient cannot be constantly under the personal observation of the general practitioner, he cannot use some of the methods employed by the specialist. Then, too, the general practitioner does not care to assume the responsibility of an operation even when it is an absolute necessity for the safety of the patient's eye, and in certain cases nothing else will take the place of an operation. It is true that an operation is seldom indicated, but when it is, the safety of the eye, as far as sight is concerned, is dependent upon it, and if the operation is properly made at the right time it will save the eye.

SYMPTOMS—Diminished mobility of the iris: The pupil, under the influence of light, dilating and contracting less rapidly than normally.

Impairment of vision: The patient is unable to read as small type as usual.

Alteration in the color of the iris (which may be so slight as to escape notice, unless examined very closely by oblique focal illumination): The iris assuming a turbid or woolly appearance.

Blood vessels (pericorneal) injected: Appearing as a pink or red ring surrounding the cornea.

Pain, photophobia, and lachrymation: Usually present.

Contraction of the pupil: In serous iritis there is increased tension and dilatation of the pupil, due to disturbance between the secretions and excretions of the eye.

CAUSES OF IIRITIS.—Syphilis causes from 60 to 70 per cent., and rheumatism causes from 30 to 40 per cent. of all cases. The disease may manifest itself after wounds of the cornea, sclerotic and iris, during cold, damp weather, and sometimes no cause is assignable for its appearance. The disease may occur *in utero*.

PROGNOSIS.—Should be guarded in every instance, especially if the attack is severe and there are synechiæ and the pupil cannot be readily dilated by atropine, or in serous iritis contracted by eserine.

Iritis appears only in adults, and seldom in persons over 70 years of age. If it appears before the tenth year of age it is due to a wound or an inflammation of the cornea, or is a manifestation of a rheumatic or syphilitic diathesis, and may be connected with menstrual difficulties in young girls at puberty.

TREATMENT.—Atropine, gr. 2 to 4, ad aqua dest. 1 oz., two or three drops in the eye every two hours, until complete dilatation has been produced, and then less often, to continue this condition. (The patient must be watched closely to prevent atropine poisoning, and, if it occurs, the atropine must be stopped for the time being.) Daturine and duboisine are sometimes used instead. In serous iritis eserine instead of atropine must be used, and if the tension is greatly increased paracentesis should be performed, and in very serious cases even iridectomy or sclerotomy. Hot dry applications, usually of cotton batting encasing the head, held in place by bandage or night cap. Put patient to bed in moderately darkened

room; keep temperature about 75 degrees and allow no draughts, and give the indicated remedy internally.

REMEDIES.—*Aconite*: In earliest stage; after exposure to cold draught of air; great heat and dryness of the eyes; marked febrile excitement.

Arnica: In rheumatic iritis, especially if caused by traumatism.

Arsenicum: In iritis with periodic burning pains; worse at night and after midnight; better from warm applications; often indicated in serous iritis.

Asafœtida: Especially syphilitic iritis and after the abuse of the mercuries; pains severe in and above the eye; throbbing, burning, pulsating pains from within outward, relieved by pressure.

Aurum: In syphilitic iritis; pains seem to be deep in the bones around the eye, from above downwards and from without inwards; worse from touch or pressure; mental depression.

Belladonna: In early stages, if caused by cold; throbbing pain; much redness of the eye and flushed face.

Bryonia: In iritis caused by colds; in a rheumatic diathesis; pains sharp and shooting, extending through the head down into the face; sensation of soreness and aching behind the eyeball, as if the eye was being pushed out of the socket; pain aggravated by moving the eyes and at night.

Cedron: In periodical, supra-orbital, ciliary neuralgia.

China: In iritis occurring after loss of vital fluids or malaria; pains periodic.

Cinnabaris: In syphilitic iritis, especially if there are condylomata on the iris or lids; pains begin in the inner canthus, extend across the brow or around the eye with shooting pain through the head; pain aggravated at night.

Clematis: Heat and dryness in the eye;

sensitiveness to cold air, to light and to bathing; worse at night.

Conium Mac.: Excessive photophobia, with no injection; hot tears gush out upon opening the eyes.

Euphrasia: In rheumatic-iritis; constant aching, sometimes darting, pains; worse at night; great ciliary injection; photophobia; cloudiness of the aqueous; synechiæ.

Gelsemium: In serous iritis alone, or with choroidal exudation.

Hamamelis: In iritis from traumatism, with hypcemia (blood in the anterior chamber).

Hepar Sulph.: In suppurative or parenchymatous iritis, or where there is corneal ulceration, or the ciliary body is involved; hypopion (pus in the anterior chamber); throbbing, boring pains; better from warmth, worse from motion of the eye; eye is tender to the touch; much photophobia and ciliary injection; lids swollen and sore to the touch and spasmodically closed; patient chilly, wants to keep warmly covered.

Kali Iod.: In syphilitic iritis, especially after much mercury; in the secondary eruption; no special indications.

Mercurius: Especially in syphilitic iritis; severe tearing, burning, boring pains around the eyes; worse at night, in damp weather and after going to bed; great sensitiveness to heat, cold and light, especially fire light; pupil contracted, with a tendency to adhesions; condylomata; hypopion.

Nitric Acid: In iritis after suppressed syphilis or abuse of mercury, and in gonorrhoeal kerrato-iritis; pressing, stinging pains, aggravated on any change of temperature and at night.

Rhus Tox: In rheumatic or idiopathic iritis from exposure to wet; suppurative iritis from traumatism in operations; lids œdematously swollen and spasmodically

closed; hot tears gush out when opening them; conjunctiva chemosed; pains worse at night and in damp weather.

Silicia: In iritis with hypopion.

Spigelia: If the pains are sharp and shooting in and around the eye, especially if they seem to spread from one point.

Sulphur: In chronic iritis, in strumous subjects after suppression of eruptions or discharges; pains are sharp and sticking; worse at night, towards morning; also as an intercurrent remedy.

Thuja: Condylomata on the iris; severe, sharp, sticking pains in the eye; worse at night; better from warmth; much heat around and above the eye; great ciliary injection.

The Missouri Institute of Homeopathy.

The Missouri Institute of Homeopathy was called to order in the board of trade hall at 9:40 a. m. April 23, by the president, Wm. G. Hall, M. D., of St. Joseph.

Sixty members were present.

After prayer by Rev. J. M. Bent, Mayor Walker delivered an address of welcome.

Dr. Ingalls, president of the college, then briefly addressed the members of the two institutes.

He stated that the work of the physicians was identified with the highest interests of humanity, compared its present advanced state with the ignorance of former times, and kindly invited the members to visit his college and joined the mayor in wishing them a hearty welcome.

President Wm. G. Hall delivered an able annual address.

The reading of the minutes and appointment of committees then consumed considerable time.

PAPERS READ.

Papers were read, followed by general discussions, as follows:

L. E. Whitney, of Carthage, on "Case of prurigo from practice," Henry Bartens, of Nokomis, Ill., on "Obesity;" H. W. Westover, of St. Joseph, on "Urinary deposits, their significance and therapeutic demands;" Clifford Mitchell, of Chicago, professor of diseases of the kidneys, on "Examination of urine in obscure conditions;" D. V. Van Syckel, of Canton, on "Morbus Brightii;" V. B. Delamater, Chicago, "Uralmia chronica;" Emily S. Colt, Kansas City, "Typhoid fever;" Wm. E. Leonard, Minneapolis, "Old school progress in therapeutics illustrated from foreign journals;" Boyles Chumblin, St. Louis, reported a case from practice; F. W. Sargent, St. Louis, "Hypertrophy of the spleen."

EVENING SESSION.

In the evening papers were read as follows:

Dr. A. C. Cowperthwaite, ex-president of the American Institute, on "Hydrophobinum;" Dr. C. J. Luyties on "The adulteration of food," discussed by several; Dr. A. C. Jones, of Holden, on "The importance of boards of health in small towns;" Dr. H. A. Barber, of Kansas City, on "Obstetrical progress;" Dr. J. W. Castlich, of Carrollton, on "Difficult labor," a subject which was afterwards extensively discussed; Dr. C. R. Muzzy, of Marshfield, on "A case of obstetrics;" Dr. E. M. Hale, of Chicago, on "Is the law of similia the only law of cure?" Dr. J. P. Dake, of Nashville, on "The true line of homeopathic progress;" Dr. Geo. M. Ockford, of Lexington, Ky., on "Generalization in the study of materia medica." These papers were discussed by Drs. Wm. D. Foster, of Kansas City, and A. C. Williamson, of Springfield.

SECOND DAY'S PROCEEDINGS OF THE INSTITUTE.—MORNING SESSION.

Dr. Wm. G. Hall, president, in the chair. Dr. L. C. McElwell, of St. Louis,

read a paper on "How I became a homeopathist." He graduated at the Missouri Medical college under the guidance of Dr. G. M. B. Maughs in 1882 at the head of his class. He read Hahnemann's *Organon* and Dunham's *Materia Medica* and was converted. Had intermittent fever which quinine would not cure, and which was effectually cured by *arsenicum album* in a high potency.

Dr. S. B. Parsons, chairman of the bureau of surgery, reported.

Dr. J. S. Mitchell, of Chicago, read a very interesting paper on "Carcinoma," illustrating the curative action of *arsenicum album*, second and third decimal, and *hoang nau*, second and third decimal triturations. Several cases of carcinoma were reported as cured by the internal and external use of these remedies. This paper was freely discussed by Drs. T. G. Comstock, E. H. Pratt, C. R. Muzzy, Jas. A. Campbell, A. C. Jones and E. Lippincott.

Prof. Phil Porter, M. D., of Pulte Medical college, Cincinnati, was admitted as a delegate.

On motion of Dr. Wm. D. Foster, Phil Porter, M. D., of Cincinnati, O., and J. S. Mitchell, M. D., of Chicago, were elected honorary members.

Dr. Wm. D. Foster, of Kansas City, read a paper on "Phimosis as a factor in neuroses." Dr. Foster's paper was discussed by Drs. T. Griswold Comstock, Henry A. Barber and E. H. Pratt.

A paper on "orificial surgery" was read by Howard Crutcher, M. D., of Memphis, Tenn.

Dr. S. E. Trott, of Kansas City, reported the case operated upon for "Fistulo in ano" and "Prolapsus Recti" at the 12th annual session by Dr. E. H. Pratt. The patient is reported in better health than for twelve years and perfectly cured.

Dr. S. B. Parsons, of St. Louis read a highly scientific paper on "Endoarteritis Obliterans — causing symmetrical gangrene of both legs and double amputation—illustrated."

Dr. E. H. Pratt, of Chicago, gave a very instructive lecture on "sympathetic nerve waste as a factor in chronic diseases."

The convention adjourned till 2 p. m., and all the members were invited to go to the Metropolitan hotel to attend a clinic to be held by Dr. E. H. Pratt, of Chicago. Two men were presented at the clinic fully illustrating the principles of orificial surgery and the necessity for an operation which was successfully made in the presence of a large number of physicians and surgeons.

NEW MEMBERS.

The following physicians were elected to membership.

Drs. T. Griswold Comstock, St. Louis, Mo.; C. F. Ellis, Eureka Springs, Ark.; Wm. D. Gentry, Kansas City, Mo.; Howard Crutcher, Memphis, Tenn.; Eldridge Lippincott, Memphis, Tenn.; Theo. W. Conzelman, St. Louis, Mo.; C. R. Muzzy, Marshfield, Mo.; Electa A. Scott, Columbus, Kan.; Walter N. Boyer, St. Joseph, Mo.; Charles W. Hinchman, Golden City; A. P. Evans, Springfield; F. L. King, Lebanon; Sumner Davis, Grand Island; Geo. MaHorney, L. J. Worthen, Paola; J. C. Dailey, Fort Smith, Ark.; J. M. Lawrence, Boonville; and Anson H. Gifford, Springfield.

AFTERNOON SESSION.

The first order of the session was devoted to an examination of urinary deposits to illustrate the papers on venal diseases presented at the afternoon session of the previous day. By means of several microscopes loaned by the faculty of Drury college, Dr. H. W. Westover

displayed quite a complete collection of urinary deposits illustrating the many pathological conditions previously discoursed upon. The members of the institute passed along the line of microscopes while Dr. Westover called their attention to the various deposits, their peculiarities and pathological indications.

ELECTION OF OFFICERS.

President, Moses T. Runnels, M. D., Kansas City, Mo.; vice-president, L. E. Whitney, M. D., Carthage; general secretary, C. J. Luyties, M. D., St. Louis; provisional secretary, A. C. Jones, M. D., Holden; treasurer, H. W. Westover, M. D., St. Joseph, Mo.; board of censors—T. Griswold Comstock, M. D., St. Louis; William D. Foster, M. D.; Kansas City; S. B. Parsons, M. D., St. Louis.

Place of meeting for the next year, St. Louis.

Dr. E. H. Pratt, of Chicago, was again called upon to give a lecture on "Orificial surgery."

Dr. Leonard Pratt, of Wheaton, Ills., was elected an honorary member.

Dr. Phil Porter, of Cincinnati, gave a lecture on "Dry heat" in gynecological affections and artificial irritation.

T. Griswold Comstock, M. D., of St. Louis, read a paper on "Infection of gonorrhoea, and its serious consequences to females. This paper was discussed at length by Drs. E. H. Pratt, A. C. Williamson, Sumner Davis, Henry Bartens, Phil. Porter and Wm. D. Foster.

Dr. A. C. Williamson, of Springfield read a paper on "Chronic metritis."

Dr. T. Griswold Comstock read a very valuable paper on "How the homeopathic physicians of Missouri can secure equal rights and privileges with old school medicine in the public institutions of the state."

EVENING SESSION.

The following delegates to societies were appointed:

To the American Institute of Homeopathy, Drs. Moses T. Runnels, Wm. D. Foster, T. Griswold Comstock, Wm. G. Hall, Wm. C. Richardson, Jas. A. Campbell, Wm. D. Gentry, S. B. Parsons, L. E. Whitney, H. W. Westover.

To the Southern Homeopathic association, Drs. Wm. G. Hall, C. W. Hinchman, J. G. DeWolf, C. R. Mussey, Moses T. Runnels.

To the Homeopathic society of the state of Kansas, Drs. H. W. Westover, Wm. D. Foster.

To the Homeopathic Medical society of Nebraska, A. C. Jones, M. D.

To the Homeopathic society of Iowa, Sumner Davis, M. D.

To the Homeopathic society of Illinois, C. J. Luyties, M. D.

Dr. Jos. A. Campbell, of St. Louis, read a paper on "Eye cases from practice." Dr. J. H. Buffum, of Chicago, read a paper on "Eye reflexes." Dr. H. Tyler Wilcox, of Los Angeles, Cal., read a paper on "Climate of Southern California." E. Lippincott, M. D., read a paper on "Some hints on catarrh and allied diseases." Dr. W. D. Gentry, of Kansas City, Mo., read paper on "Papilloma of the bladder."

Bills were ordered paid to the amount of \$138.

Resolutions of thanks to *The Springfield Republican* for full and accurate reports of the session and to the Y. M. C. A. for the use of the hall were passed.

The institute adjourned to meet at St. Louis one year hence.

The Illinois Homeopathic Medical association has a nominal membership of 354.

Galveston's Semi-Centennial.

Galveston is putting her best foot foremost in an effort to befittingly celebrate the semi-centennial anniversary of the incorporation of the city by the sea. Preparations for a grand civic and military display, probably unsurpassed in the history of the South, are being made. The fun will commence promptly and early on the 4th of June and continue until late in the night of June 15. Reduced rates over all railroads from all points in the State will be secured, and those who want to bathe in the glorious surf and breathe the wave-kissed breezes from the Gulf of Mexico will not soon again be afforded such an opportunity. In addition to all the natural attractions, the management having charge of the arrangements announce that the military display on this occasion will be something marvelous. Altogether prizes aggregating \$22,975 are offered for competing military, horse racing and regattas.

At night the grand panoramic spectacular military drama, "Fall of Paris and Reign of the Commune," will furnish a spectacle worth going hundreds of miles to see. This is one of the most startling and realistic productions ever witnessed in the south.

On the encampment grounds the regular army will be represented by four companies of infantry, six companies of cavalry, a battery and military band. Five interstate and twelve state companies have already entered, and it is safely estimated that there will be 5,000 soldiers in camp. The camp grounds are within two miles of the heart of the city, and reached by the Galveston and Western railroad, affording ample and cheap transportation. Galveston extends an invitation, especially to the people of Texas, to join with her in celebrating her semi-centennial.

Vegetable Diet.

I. *In the case of health.*—It is important to understand clearly the meaning of the expression "Vegetable diet."

I distinguish in fact :—

- (1) Pure vegetarian diet.
- (2) Qualified vegetarian diet (which is the first plus the use of milk and eggs).
- (3) Mixed diet (i. e., qualified vegetable diet plus the use of flesh meat).
- (4) Pure meat diet.

(a) I am disposed to admit that one may thrive (though not with the same chances of life) on each of the above mentioned diets, provided that the diet—

(1) be suited to the climate in which one is living;

(2) that its components be properly proportioned, that is to say, that it have all the qualities in due proportion and composition.

I do not believe that the diet of an Equiman ought to be the same as that of an inhabitant of the tropics.

(b) I admit, however, that a pure vegetable diet, and above all, a qualified vegetable diet, is sufficient for most of the possible conditions of human life; nay, more, that it is the only form of the diet suited to most climates.

(c) I maintain that every kind of diet should have its components duly proportioned. It is generally in this point that the fault lies. Whatever diet a man adopts it is rarely that he does not sin against this precept. Thus one who adopts a meat diet eats too much muscular flesh (beef-steak, roast beef, &c.), and does not eat enough of the lighter elements (fat, lard, conjunctive tissue, &c.) The vegetarian, on the other hand, goes to excess either in the consumption of water or watery substances or acids or aromatic substances, or he does not consume enough of the highly azotic vegetable elements.

The refinement (I do not mean the search for purity) in dietetic matters which is to be found amongst the rich secures in too many cases only the elimination of substances which in appearance are not very nutritious, but which are as indispensable for man as the most nutritious substances.

II. *In case of sickness.*—From this point of view I allow that the diet ought to vary with the nature of the disease itself—

(a) Thus, there are a certain number of diseases (and they are few) in which, at any rate in temperate climates, a pure or almost pure meat diet is favorable, if not indispensable, to their cure. For example, fevers resulting from malarious poisoning (observe that not every kind of intermittent fever is *ipso facto* malarious, and therefore does not necessarily require this kind of diet). Another example:—in a *certain number* of diabetic conditions a meat diet is prescribed with advantage.

(b) On the other hand, there is a crowd of diseases (and their name is legion) in which, on the contrary, a vegetable diet is preferable, or even indispensable, whether for the purpose of cure or of prevention. I mention here amongst others morbid phlegmatic conditions, morbid conditions of catarrh; infectious fevers, typhus, small-pox, measles, diphtheria, typhoid fever, &c.

In these diseases doctors misapply meat, milk, broth, meat-gravy, &c.

To sum up briefly, I believe that a vegetarian diet (well proportioned) has been entirely neglected by the public and by the doctors, and that as much from the point of view of its curative as of its preventive efficacy in most though not all kinds of disease. For my own part, in my practice, and in my own neighborhood, I insist upon the duty of checking *enormous abuse which prevails in the matter of animal food.*

DR. BONIFACE SCHMITZ,
8th March, 1888. *Belgium.*

The Reaction Continues.

Some months ago I wrote *The Journal* of the decline of the faithcureism and of other isms and whims, good and bad, in the city of Chicago. I am pleased, at the present time, to record the fact that therapeutic humbugs are still declining. I predicted that unless "Christian Science" could bring forth some able-bodied specimens of a union of Christianity and Science the "System" would have to go to the wall for lack of qersimilitude. Well, it has gone to the wall, and gone there to stay. Just how long it will be before another swell society affair pretending superhuman things comes to the surface the good Lord only knows, but certain it is that "Christian Science," which was conceived in egotism and sustained by hypocrisy, has, with its curtains, candles, and draperies, died out, and now decays in the dark, deep grave dug by the intolerable blundering of its staunchest adherents.

It is just a trifle instructive to the young, and not altogether uninteresting to the old, to review the initial attitudes of various therapeutic methods. Samuel Hahnemann, who founded a system of medicine upon the rock of God's Truth, where it has withstood the assaults of a thousand arrows poisoned with the venom of human hatred, which system will live and grow stronger as the waves of time roll over it, advised his disciples to "*Try it and publish Results.*" Results have been published, and they are revolutionizing what is left of mediæval therapeutic.

Not so with "Christian Science." It didn't need a trial; it didn't need investigation; in fact, it hardly needed anything, being too nearly perfect to need any additions. In short, it was entirely too heavenly for this world, and now that it

has "gone to join the angels" there will be few, if any, tears shed over its departure.

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Dr. J. S. Mitchell has done the profession a signal service by proving the efficacy of Homeopathic remedies applied locally for cancer. Dr. Mitchell's treatment may be briefly described as consisting of the local application of triturations (principally the second decimal) of arsenic to the diseased surface and giving the remedy in dilution at the same time. That this method of treating carcinoma possesses great value there can be no question, for a large number of cases have been either cured or benefitted by it; but time alone will tell whether Dr. Mitchell has shown the world how to deal with *all* cases of cancer. It is hoped that he has.

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The esteem in which medical "education" is held by the enlightened press of the country is well illustrated by the following editorial from this morning's *Herald*:

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AN INSIDIOUS ATTEMPT.

"The Journal of the American Medical Association is guilty of underhanded efforts which ought to be exposed. In discussing the action of various state legislatures with reference to laws relating to the practice of medicine, the Journal says:

"The only legitimate object for the enactment of state laws regulating the education and practice of medical men, is to secure an educated and skillful profession, and thereby protect the people from the disastrous effects of ignorance and imposition."

There is no objection to this statement; it is something with which everybody will cordially agree. It is what follows

contains the deadly sting. "To secure this most desirable object," the article continues "the laws must be so framed as to require every one proposing to study medicine to have, first, a good knowledge of the elementary branches of literature, mathematics, physics and the natural sciences, with the mental discipline that such a degree of general education naturally develops."

This is unmistakably a secret, deadly blow aimed at the medical colleges, whose result will be the extinction of a large majority of them. What! cut off from the colleges their principal sources of supply of the material of which doctors are made and the income of the faculties are derived? It is preposterous! These limitations are proscriptive and outrageous. What show for a liberal profession would remain for the farmers' boys who, tired of perspiring in the wheat field, enter a medical college, and in a year or so graduate as first-class physicians?

This won't do! It is an insidious attempt to bankrupt medical colleges and retain ambitious "jays" in the servitude of agricultural masters.

It is high time the medical press of this country were telling the truth about the shameless degradation of medical education. The indications are, however, that unless the profession reforms itself, reformation, which ought to be revolutionary, will come from the outside.

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Chicago is the Homeopathic centre of the world. The city has 350 physicians, several journals plenty of pharmacies, and abundant clientage.

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NOTES.

The only Gatchell is now exclusive owner and editor of *The Medical Era*. He is a great editor and he is the inspira-

tion of one of the greatest medical periodicals in the world.

It is reported that Drs. Gross and Hale will soon publish a journal to be called *The New Remedies*.

I hear many kind expressions concerning the southern association and the approaching Memphis meeting. Chicago has always done the right thing by the Southern meetings, and November will prove no exception.

HOWARD CRUTCHER.

CHICAGO, May 12, 1889.

Book Review.

AMERICAN RESORTS; WITH NOTES UPON THEIR CLIMATE. By Bushard W. James, A. M. M. D. Published by F. A. Davis, 1231 Filbert street, Philadelphia, U. S. A.

This is a practical work of much value to the health-seeker, in search of information as to the best location for his particular ailment.

The author maintains very truthfully that it is not necessary for invalids to cross oceans in order to find any kind of climatic effect desired, because we have at home all that any other portion of the world affords, and much else that cannot be found elsewhere. In short, that the United States affords climate, springs, scenery, and all else for the cure or relief of the sufferer that nature affords.

A MANUAL OF DISEASES OF THE EAR. By Albert H. Buck, M. D., Clinical Professor of the Diseases of the Ear in College of Physicians and Surgeons, New York. Published by Messrs. William Wood & Co., 56 and 58 Lafayette place, New York.

In this edition Prof. Buck modifies the views expressed in his work issued in 1880, and makes some very important changes in the treatment of aural affections. The author has also thoroughly revised the text, and now publishes it in

a form adapted to the use as well of medical students as practitioners. In the present treatise the doctor has made liberal use of his case-books for supplying brief descriptions of actual instances observed in practice.

PSYCHOLOGY AS A NATURAL SCIENCE APPLIED TO THE SOLUTION OF OCCULT PSYCHIC PHENOMENA. By C. G. Rane, M. D. Published by Porter & Coates, Philadelphia.

This work treats of psychology as a natural science in a clear and concise manner. The author writes:

"The application of psychology as a natural science to the solution of occult phenomena is the culminating point of this volume, and the result of my own thought and research. I have thus honestly endeavored to add my share of work to the grand labors of those indefatigable searchers after truth who are endeavoring to solve the vexed questions of psychic life and its seemingly mysterious phenomena." And beyond doubt the author will convince any one who reads the work that he has made a success of it.

ELECTRICITY AND THE METHODS OF ITS EMPLOYMENT IN REMOVING SUPERFLUOUS HAIR AND OTHER FACIAL BLEMISHES. By Plym. T. Hayes, A. M. M. D., late Professor of Chemistry and Indiology, Woman's Medical College. Publisher, W. P. Keener, 96 Washington street, Chicago.

The object of this book is to answer the many inquiries relative to the removal of facial blemishes, superfluous hair, and to furnish instructions to those who wish to become proficient in this line. The aim of the author is to present the subject in such a manner that success will follow the efforts of physicians towards effecting the desired results.

Evils of Vaccination.

LIKE OTHER EVILS, CANNOT SURVIVE THE TEST OF HONEST PROFESSIONAL INVESTIGATION.

"Truth crushed to earth shall rise again—
The eternal years of God are hers,
But Error, wounded, writhes in pain
And dies among his worshipers."

Vaccinia is the disease produced by vaccination. Its distinctive features are the febrile reaction which occurs in the organism after vaccination and the local phenomena at the point of insertion of the vaccinal pus; also the varioloid symptoms which sometimes follow vaccination. Therefore, when we vaccinate a perfectly healthy person, we inoculate the system with disease. Hence it must follow that the protective power of vaccination is due to the diseased state of the body.

Vaccinosis is a disease which embraces vaccinia, and something more.

One may be successfully vaccinated—the febrile reaction, the local phenomena follow the insertion of the virus, and have complete recovery from these symptoms, yet a profound impression be made, the virus take deep hold upon the constitution, not as scrofula, syphilis and tuberculosis, the common accidents of vaccination, recognized by physicians.

The element of vaccinal virus which produces this profound impression may do so without any of the phenomena of so-called successful vaccination being present, yet be very severe in the internal developments manifested by the super-vention of various morbid conditions.

How unfortunate that the belief prevails that if the vaccination does not take the individual remains uninfluenced by the insertion of virus under the cuticle.

In a large proportion of these cases the virus is absorbed and the taking becomes a process—paresis, cephalalgial, neuralgial, eczema pimples, &c.

The world owes much to Boenninghausen for presenting to the medical profession the homeopathicity of *thuya occidentalis* to small-pox, and to Kunkel, Goullon, and especially to J. Compton Burnett, for extending its use to the cure of the ill effects of vaccination.

My attention was called to the value of *thuya oc.*, I believe, in 1885, by one of Dr. Burnett's articles on vaccinosis. The article enabled me to call to mind a number of cases which had baffled the skill of several physicians beside my own. Notably the little daughter of an army officer, a very bright and healthy child. When about eight years of age was vaccinated by the surgeon of the San Antonio post. Much inflammation ensued, and she had a bad arm. Before the sore healed she became very nervous, irritable, and suffered from a continual frontal headache. She was treated for a number of months by the surgeon who vaccinated her. Failing to relieve the little patient of her sufferings, one of the most skillful local allopathic physicians was employed. He also failing after a trial of several months, she came into my charge.

The closest study and persistent effort on my part, covering a period of five weeks, proved an utter failure, and I was relieved of the charge of my patient by the assignment of her father to duty at another post. Eighteen months had elapsed when the mother wrote me of her great affliction. Her husband had died and, although she had employed the most skillful physicians in a large city, they had failed to relieve her child, who had become a mere shadow of her former self—had not attended school a day, had given up all hope of education, every pleasure of life, and looked ahead to nothing but a miserable existence, and implored me to try once more to do something for her child.

Having cured a number of cases of vaccinosis with *thuya occidentalis*, the 3x of this remedy was prescribed for this patient. When it had been taken fifteen days the mother reported a perceptible improvement. The 6x was prescribed and a decided improvement was reported. The last prescription was repeated and followed by the 30x of same remedy.

At the expiration of three months from date of first prescription the mother reported her daughter well, and one year subsequent that she had attended school during the past year and that she enjoyed the best of health.

Early in 1886 Mr. and Mrs. H. wished to consult me upon the subject of vaccination of their children, six in number, their ages ranging from seven months to thirteen years. A declaration that I would not permit my own to be vaccinated added to a conviction in their minds adverse to vaccination, they at once arrived at a negative decision. But the local press announced that small-pox was raging in the City of Mexico. The dreaded disease was within the short distance of five or six hundred miles of us. The honorable mayor issued a decree that everybody should be vaccinated—a limit of ten days was given, and after the expiration of that limit no pupil unvaccinated would be permitted to attend any of the public schools within the corporate limits. A reign of terror was abroad throughout the city. These parents could not permit their children to be deprived of the privilege of attending school. A change of mind was the result, and my partner vaccinated, as we believed, with the purest virus in the market, the six children, and revaccinated the mother.

The parents and children were very healthy, and a most thorough investigation failed to establish any family taint

whatever. Five of the children had a very sore arm. The mother and one child did not take. Before the characteristic sores on the arms healed an eczematous eruption appeared over more or less of the surface of the body of each of the children, quite as profuse on the one that did not take; also on the mother. While this eruption was most profuse on the face, neck, breast, and arms, it was observable more or less over the entire surface of the body. The infant had a large sore on its chin and one at each corner of the mouth and one involving most of the lower lip, including much of the mucus membrane. The mother had a number of sores on the mammary glands, resembling those on the chin and lips of the infant. They were at the base of the nipples, almost surrounding them. As they did not appear for some days after those on the infant's lips, they were regarded as the result of inoculation by contact of the lips while nursing.

Not at first diagnosing the disease, eczema vaccinosis, the patients were given, homeopathically, the remedies for eczema, one after another, for a period of four or five weeks, with alternating improvement and aggravation. There was no substantial improvement until the disease was regarded as vaccinosis, and *thuya occidentalis* was prescribed, under the influence of which all recovered in varying periods of from two to eight weeks. The family removed from the city, and after a lapse of two years, upon inquiry, Mrs. H. reported that herself and children were well and there had been no return of the disease.

Two sons of Mr. and Mrs. M., aged respectively ten and eight years, were vaccinated in January, 1886—the elder did not take, the younger had quite a bad arm. When the sore on the arm of the latter was at its greatest perfection an eczema

appeared on both. The eruption on the younger disappeared in a short time under the influence of antimonium tart., but was succeeded by bronchitis. The eruption on the elder proved more stubborn, resisting for several months the indicated remedies. Ultimately both recovered under the influence of *thuya occidentalis*.

Not being a believer in the infallibility of medicines, I do not believe *thuya occidentalis* will cure every case of vaccinosis. It failed in a small proportion of a large number of my own cases, similar to those reported above; but I do believe it as much a specific for vaccinosis as mercury for syphilis, belladonna for scarlet fever or baptista for typhoid fever. I believe also that vaccinosis is as much a disease or pathological condition as is small-pox, syphilis or typhoid fever.

[TO BE CONTINUED.]

Education and Legislation.

BY T. GRISWOLD COMSTOCK, M. D., ST. LOUIS.

[Address delivered at the Missouri Institute of Homeopathy, annual meeting at Springfield, Mo., April 24, 1889.]

Mr. President and Gentlemen of the Missouri Institute of Homeopathy:

I am glad to meet with you at this time and gratefully tender my thanks for the kindly invitation to address you upon matters of importance in respect to our position as a medical body and our relation to the old school practice and to the state. I am glad to take a respite, however brief, from the many cares and calls of city life, to meet you here and talk of those interests most dear to us as professors of medicine. I congratulate you upon the interest of the fraternal sympathies that bring us together in sweet concord to consult upon our professional

duties and relations to each other and how we ought to stand in respect to the state authorities. We have already done well in the state, and the silent but potent influence of our practice is reaching far and wide, but antagonistic to us comes the interests, prejudices and ignorance of the old school, so that as yet we are not recognized as we ought to be by the state institutions and authorities.

Permit me to say just here, though it be a little out of place in the order of my thought, that it is a gross injustice and a violation of every principle of equal rights for any state to recognize any one school of medical practice as being superior to any other. The state has a right to know whether those professing to practice medicine are qualified. But it has no right to interpose any bar or hindrance in any form to any scientific school of medicine. The diploma of the homeopathic or new school doctors should be his entire defense and protection. We all know that this government cannot recognize one sect or church or form of religion as better than another. It must leave them all upon the platform of equality. And so with the great schools of medicine. Let our state give no exclusive preference to any one school of medicine, because it is an outrage and a gross injustice to all others to do so.

"I am of the opinion," says Dr. Hel-muth, "that until the old school of medicine allows us to exercise our own judgment in the therapeutics, gives us free access to its medical societies without demanding retractions, grants us a proper position in the army and navy of our country, it still forces upon us that sectarianism which it affects to despise and of which it is such a sad example."

That keen sense of tolerance and fair play which characterizes our people should correct such a wrong. There is a

strong feeling in this country, and it is growing, that homeopathy has been in the past most unjustly dealt with by the opposing allopathic doctors. Every weapon of satire and falsehood has been used to decry our practice and denounce us before the people. But the scientific truth was mighty, and calmly and bravely it was held by the few until they became the many. Fifty years ago it was no uncommon thing for homeopathy to be publicly condemned in schools and colleges of medicine by their learned professors. It was pronounced a "monstrous imposture." Disciples of Hahnemann were called "assassins" in the London Lancet of January number, 1851. But conscious of rectitude and willing to suffer for the sake of a great truth, in obloquy and abuse our predecessors worked right on and silenced the bitter antagonism of the old school by cures that demonstrated the law of similars on which we rely.

But this has always been so. Truth has had to fight its way among a thousand foes. New ideas and those that maintain them must be crucified before an ascension on the wings of triumph is possible. The pathway of human progress has been whitened by the bones of reformers. Every great idea or grand reform in the interest of humanity has been wrought in blood and tears by human suffering. There have been glorious martyrs of science as well as of religion. The school of medicine which we profess and practice is now secure from much of the vindictive violence and brutality of former times. Our opponents are compelled at last to respect the facts and results which they can neither explain away or deny. We have won and conquered the right to be. And the fairest culture and intelligence of the country have endorsed our principles and practice. On a firm basis to-day stands

the new school of medicine. It is, therefore, full time now that the recognition which we have gained from the old school in New York be extended and adopted by every state in the union.

The great state of New York, great in its achievements in every department of human activity and progress, clearly and fully recognizes homeopathy as a regular school of scientific medicine. Here the grand state of Missouri, the empire state of the west, should help forward this great reform, and do us a noble justice, and thus lead on until every state of the union does likewise. We do not come before the people in any cringing attitude. We have confidence that our just claims will yet be heard. We know and have proved here and in Europe that the principle, the science and the practice of homeopathy first announced by Hahnemann, are founded upon a rock. Our contention is, that having now proved our right to exist we demand recognition and equal place with any and all.

It is no idle boast to say that the most cultivated and thoughtful of the laity are to be found constantly among our most confiding patients. Where there is intelligence we are sure to gain a foothold. Our appeal is not like that of the charlatan to the ignorance and credulity of the patient. Homeopathy stands out as a great fact in the advance of medicine and nothing can hide it.

"Truth crushed to earth shall rise again,
"The eternal years of God are hers."

Let us now address ourselves to some special and practical suggestions, as to what we can and ought to do. This is a gathering in a common interest of those who have the courage to discuss and measure our wants and our necessities.

First, I speak for myself certainly and maybe for you when I say that we all

need to give choice hours to study. No matter how hard we may be called to work, we must secure time to keep fully abreast with the whole world of medical discovery and invention. Our claim is that we are equal to any, therefore we must be behind none. We want to exercise a more potent and official influence in this state than we have as yet been able to do. What then should be our program and work? We must stand shoulder to shoulder and with a locked step. We must more earnestly and heartily sympathize with each other in this work and be ready at all times to defend and illustrate our doctrines and principles of healing. Let our hearts be more thoroughly knit together in most loving and loyal service to each other and the cause we represent. Petty factional disputes and mere personal schemings must give way to broader brain thought when opposed to the general good.

Inscribed over the gateway of a Swiss-town are the words as translated: "Each for all and all for each." With that principle of action we shall surely prevail. I know that the homeopaths in this state are only one to ten in comparison with the whole number of physicians. But that need not discourage us. All the best and greatest things in the world have been done by those in the minority. A compact, united and intelligent minority are often able to command a compromise and win respect. The Macedonian Phalanx by its solid formation and drill could pierce through and utterly rout the vast armies of Darius. The old school has possession, so had the Ptolemaic theory of the universe, but modern science arose and it fell forever.

The world moves.

We have vigorously contested the exclusive claims of the old school practice in New York and have gained the day.

The morning light is breaking in the east. We hail its movement westward. "Westward the course of empire takes its way." One thing is certain, there are precious few things to be had in this world without fighting for them. Now if we can have a close knit and firm organization in this state, and one that includes every worthy and desirable member of our school of practice, under a code of rules strong and just, we shall march on to victory.

What we claim and ask for and will be satisfied with nothing less, is an equal chance and equal rights before the law, and a fair hearing at the bar of public opinion. We ask the good people of Missouri to concede to us just what is granted to any other system of practice. And if we do not prove our skill and science and save as many patients as any others we will retire in shame. I declare that the law, the principle and the science which lie at the foundation of our practice are no longer open to question.

Again, in order to succeed we must produce first-rate men from first-rate schools. There must be no lack or faltering here. We must graduate first-class men with first-class education. If our means and methods of instruction are not equal to the best, it must become a passion, an ideal and a fixed resolution to make them so. Great care should be taken to encourage no young man to study medicine who is not a good deal better than the average in natural abilities. The course of study in all the medical schools of every practice are all too short and imperfect. With aptitude and fitness and unceasing labor a student may lay the foundations of his work and little more. It would be a wise move in the best interests of medical science to extend the term of study to at least four

years and require three courses of lectures lasting from six to nine months and to graduate none but those who have given conclusive evidence of ability and acquisition. The medical schools of the west are certainly sending too many into the profession on short notice. Education consists of two very distinct things, the training of the faculties and the acquisition of real knowledge. Education does not come by merely willing, but it does come by hard work and the invocation of many a night vigil. I speak everywhere and strongly for more patience and hard study to fit one for the noble profession of medicine.

The profession of healing is hardly second to any. The Saviour of mankind, our Lord Jesus Christ, was a healer. We should magnify our office and calling. It has a lofty ideal. It deals with the most wonderful thing God ever made, the human organization, with its infinitely delicate tissues and marvelous combinations of movements and of forces. Let us keep ever before us the high aim of the profession and when we have done, a sweet consciousness will come to us, in our last hours, that we have not lived in vain, that pain and suffering have been removed by our skill and our patience.

In closing let me say that we must have faith unshaken in the great law and principle on which we found our school and our practice. And more than even that we must be so fully trained in our calling as to have faith in ourselves so, that we may properly apply the law if we would work out the best results for those who come to us for help in their need. Faith is the sublime principle that saves a world. He who is constantly doubting of his methods and modes and looks on the dark side till all sides become dark, is by nature unfit to practice medicine in any school. You had

better die than lose faith in yourself and in your possibilities.

Gentlemen, if I may dare to offer one word of personal experience, I will say that when I have had a firm faith that I could help a patient I have rarely failed. As soon as I lose my faith I lose all. No other possible profession would I have in exchange for our own. I have sought to know what is taught of medicine from the best schools in this country and in Europe. I do not regret the time or the cost. But I tell you frankly that the best school of medicine and the best of teachers may often be found at the bedside of the sick and suffering, when the intellect is vastly quickened at the sight of physical anguish and the sympathies of a true heart are evoked.

Trusting that we shall live to see our school of practice honored in every state, and protected by wise and equal laws and legislation, let us work on in faith, in our several lines of duty, and leave to time and the better judgment of the people to do us justice.

"Let us then be up and doing
With a heart for any fate,
Still achieving, still pursuing
Learn to labor and to wait."
—Longfellow's poem of life.

Writing For the Press.

In writing for the press use nothing smaller than a half sheet of note paper, even though it contains but a single word; white paper is cheap, and anything written on a little two inches by four slip is liable to get lost or blown away. Don't abbreviate. It is an abomination to write "pres." and "v. pres." for president and vice president, while the person who writes "Thurs. eve." for Thursday evening ought to be drawn and quartered. Do not omit words and expect the editor or the printer to supply them; the only

proper place for manuscript that states "Mr. S. made good speech; reply by Brown" for "Mr. Smith made a good speech which was replied to by Mr. Brown," is the waste basket. Do not crowd lines too near together or attempt to change a word by writing over it. Cross out and begin in a new place, or write the word wanted directly over the one crossed. Do not make "a short &" when you want a long "and" to appear in print. We have known even this seemingly slight defect to make a composing room smell of brimstone. If you begin an article and put no head to it, leave space at the top so the editor may write one without pasting on another sheet. If you are a clergyman or the secretary of a secret organization, put neither the words "come," all are invited" nor "a full attendance desired" at the close of a notice of a meeting. If the editor does his duty he will cross out all such superfluous words, and perhaps take a dislike to the writer who persists in putting them in. Never write upon both sides of the paper, unless you desire the contempt of everybody in the printing office from the devil down. Finally, if you do not know how to spell or construct sentences, do not write for the press at all; it will save you considerable trouble. Few, if any, paragraphs should be made in articles that relate to one subject. The matter of paragraphs is largely arbitrary in various newspaper offices; some newspapers make a good many and others very few.—*Fort Worth Gazette.*

To those who make a practice of administering opiates. "The vain empiric imagines it to be the beaten highway, and plumes himself on the wretched power of giving a few hours ease, unconcerned if, during this specious calm, the disease plants its roots still deeper."—*Hahnemann.*

Doctors Disagree.

JACKSONVILLE, April 22.

To the Editor of the Times-Union.

There has been introduced into the house by Mr. Christie, a bill to regulate the practice of medicine in this state. Section 1 provides that the presiding judge of such district shall appoint a board of medical examiners. Section 2 is as follows:

"Said board of medical examiners shall be composed of three practicing physicians of known ability, and who are graduates of some medical college recognized by the American Medical Association and who are residents of the district, for which they are appointed. Now what does this very innocent looking section mean? It means that no one but allopathic physicians shall be members of these boards, for colleges of other schools of medicine are not recognized by the high and mighty American Medical Association. It also means that if a homeopathic or eclectic physician should go before these boards for examination he would be "plucked" and refused a license to practice. It would make no difference how competent he was, or of how much learning, the examination would be made of such a character that neither he nor any other physician could pass it. I doubt if there is a physician in the state of Florida of ten years practice who could pass the examination he passed on graduation.

This law (if it becomes a law) would be an outrage, and entirely at variance with the spirit of American institutions. By what right do allopathic physicians arrogate to themselves the power to say who shall practice medicine and who shall not? As well might the Episcopalians or Methodists dictate to what church or denomination people should belong.

Our allopathic friends may protest that they would be perfectly fair and just in these examinations, but that would be impossible. It would be impossible to constitute a board that would be fair to a homeopathic physician. "I fear the Greeks when bearing gifts."

The only right way would be to constitute a board of three physicians, one each from the recognized schools of medicine. But why is it necessary to have boards of examiners at all? If a physician holds a diploma of a regularly chartered medical college, is not that sufficient evidence that he has passed an examination? There are physicians in all schools of medicine who are incompetent according to the opinion of some other physicians. I have in my mind now several allopathic physicians whom I consider to be grossly incompetent, yet my thinking so does not make them so in the opinion of other people. Let every man be free to judge for himself on questions of medicine, as well as on questions of religion.

When one class of men set themselves up as the only wise men, the embodiment of learning, and the guardians of medical knowledge, they only make themselves ridiculous, and bring contempt upon the noblest of professions.

The bill introduced by Mr. Moreno is unobjectionable. It provides that a physician shall make affidavit as to his diploma, and that it must be indorsed by the state board of health. This certainly is sufficient protection to the public, and is all that is necessary.

H. R. STOUT, M. D.

Dr. T. E. Linn, alumnus of Pulte, '88, has been elected to the position of resident physician of his alma mater. The doctor is a young man of energy, sterling ability and will do honor to his new charge.

Laws of Tennessee.

As this law is in itself so lengthy we will not comment on it now, but will do so hereafter.

SENATE BILL NO. 79.

An act to regulate the practice of medicine and surgery in the state of Tennessee.

Section 1. Be it enacted by the general assembly of the state of Tennessee, That no person shall practice medicine in any of its departments, except dentistry, within the state unless such person possesses all the qualifications required by this act. If a graduate in medicine, he shall present his diploma to the state board of medical examiners for verification as to its genuineness. If such a diploma is found genuine, and from a legally chartered allopathic, homeopathic or eclectic medical college in good standing with the school of medicine in which said college is classed, of which the state board of medical examiners shall be the judge, and if the person named therein be the person claiming and presenting the same, the state board of medical examiners shall issue a certificate to that effect, signed by all the members thereof, and such certificate shall be conclusive as to the right of the lawful holder of the same to practice medicine in this state.

Sec. 2. Be it further enacted, That all persons who shall be in the actual practice of medicine or surgery in the state at the time of the passage of this act shall, within six months after this act takes effect, be required to make satisfactory proof of this fact to the county court clerk of the county in which he resides, when said county clerk shall issue a certificate in each case, in accordance with the facts, and such certificate shall entitle the lawful holder thereof to all the

privileges contemplated in this act. A certified copy of this certificate shall be forwarded to the state board of medical examiners.

Sec. 3. Be it further enacted, That any person wishing to enter upon the practice of medicine in any of its branches, except dentistry, after the passage of this act, shall present to the board of medical examiners a diploma from some medical college in good standing, and said board shall recognize any college that is recognized by the National Medical association, or present himself before the board for examination upon the following branches, viz: Anatomy, physiology, chemistry, pathology, surgery, obstetrics and therapeutics. If the diploma be found genuine, or if the applicant for examination shall be found worthy and competent, then said board shall issue a certificate in each case in accordance with the facts, and said certificate shall entitle the lawful holder thereof to all the privileges of this act.

Sec. 4. Be it further enacted, That immediately upon the passage of this act, the governor shall appoint six graduate physicians, two from each grand division of the state, as a state board of medical examiners, whose duty it shall be to examine into the qualifications of all applicants for license to practice medicine or surgery, in accordance with the foregoing sections of this act; provided that the three schools of medicine, viz: allopath, homeopath and eclectic, shall be represented on said board of examiners. Not less than five shall constitute a quorum, and a majority of those present shall be necessary to reject any application, but such rejection shall not bar the applicant against re-examination after the lapse of three months; provided, that the members of the board representing each school of medicine shall have the right to

examine all applicants of that school, and the board shall issue the certificate of qualification to applicants who are recommended by the members of the board who belong to said school after examination.

Sec. 5. Be it further enacted, That to prevent delay and inconvenience the members of the board may grant a temporary license to any applicant and make a report thereof to the board at the next regular meeting; such temporary license shall not continue in force longer than until the next regular meeting of the board, and such temporary license shall in no case be granted within six months after the applicant has been refused a license by the board.

Sec. 6. Be it further enacted; That the first board of medical examiners shall meet and organize thirty days from the date of their appointment, and shall name for the terms of one, two, three, four, five and six years, respectively, deciding by lot or agreement among themselves as to their respective terms of service; at the expiration of the above terms each member of the board shall be appointed for six years; all vacancies occurring in the board by death or resignation shall be filled by the board itself for the remainder of such term or terms; the members of said board shall not be members of the state board of health, nor any medical faculty.

Sec. 7. Be it further enacted, That the regular meetings of the board shall be once each year, at such time and place as the board may decide, but the president of the board may call a special meeting when it is demanded by public necessity, the call to be issued by the secretary and signed by the president.

Sec. 8. Be it further enacted, That the board of medical examiners are authorized to elect such officers, and to form

such by-laws as may be necessary for the efficient operations of the board.

Sec. 9. Be it further enacted, That every person holding a certificate from the state board of medical examiners or the county court clerk, shall have it recorded in the office of the county court clerk in which he resides, and the date of record shall be endorsed thereon. Until such record is made the holder of such certificate shall not exercise any of the rights or privileges therein conferred to practice medicine. Any person removing from one county to another to practice medicine shall record in like manner the certificates in the county to which he removes, and the holder of the certificates shall pay to the county clerk the usual record fee for so doing. Practitioners in one county may go from one county to another on professional business without being required to register if they have done so in the county in which they reside.

Sec. 10. Be it further enacted, That county clerks shall keep in a book provided for the purpose a complete list of the certificates recorded by him, with the date of issue of certificate and date of record. If the certificate be based on a diploma he shall record the name of the medical institution conferring it, and the date when conferred. The register of the county clerk shall be open to public inspection during business hours.

Sec. 11. Be it further enacted, That the board of examiners shall keep a record of its proceedings in a book for that purpose, which shall be open for inspection, and shall record the name of each applicant, the time of granting a license with the names of the members of the board present.

Sec. 12. Be it further enacted, That the members of said board shall receive as a compensation for their services ten

(\$10) dollars per day during their sessions, and in addition thereto their hotel and traveling expenses by the most direct route to and from their respective places of residences, to be paid out of any moneys in the treasury of the board, upon the certificate of the president and secretary. The board is empowered to demand a fee of one dollar (\$1) for the issuing of each certificate. The fee for examination of non-graduates shall be ten dollars (\$10). If the applicant fails to pass a satisfactory examination, and no certificate or license is issued to him, five dollars (\$5) only of his fee is to be retained. The fee for a certificate of temporary license shall be one dollar (\$1), to be paid into the treasury of the board, said fee to be accredited to the applicant when he applies to the board for permanent license.

Sec. 13. Be it further enacted, That any itinerent vendor of any drug, nostrum, ointment or application of any kind, intended for the treatment of disease or injury, or who may, by writing, printing or other method, profess to cure or treat disease or deformity, by any drug, nostrum, manipulation or other expedient, in this state, shall, if found guilty, be fined in any sum not less than one (100) hundred dollars, and not exceeding four hundred (\$400) dollars for each offense, to be recovered in action of debt before any court of competent jurisdiction.

Sec. 14. Be it further enacted, That any person who shall practice medicine or surgery in this state without the certificate issued by the board of examiners or county court clerk, as provided in section 2 in compliance with the provisions of this act, shall, for each and every instance of such practice, forfeit and pay to the people of the state of Tennessee, for the use of said board of examiners, the

sum of twenty-five dollars for the first offense and two hundred (\$200) dollars for each subsequent offense, the same to be recovered in an action of debt before any court of competent jurisdiction. Any person filing or attempting to file, as his own, the diploma or certificate of another, or a forged affidavit of identification, shall be guilty of felony, and upon conviction shall be subject to such punishment as is made and provided by the statute of the state for the crime of forgery. But this act is not to be construed so as to prohibit the right of appeal; and when an appeal is prayed in behalf of the people no appeal bond shall be required or filed, whether the appeal be from a justice of the peace or from a higher court; but it shall be sufficient, in behalf of the people of the state of Tennessee, for the use of the board of examiners, to pray appeal, and thereupon appeal may be had without bond or security. Nothing in this act shall be construed to apply to women who pursue the avocation of midwife.

Sec. 15. Be it further enacted, That the secretary and treasurer of the board of examiners shall give bond with good security in amount sufficient to cover all moneys coming into his hands, for the safe keeping of the same.

Sec. 16. Be it further enacted, That the said board shall have power to revoke any license or certificate issued by them, when, upon satisfactory proof, it shall appear that the physician thus licensed has been guilty of immoral or unprofessional conduct.

Sec. 17. Be it further enacted, That it shall not be lawful for the state board of medical examiners, or any member thereof, in any manner whatever, or for any purpose, to charge or obligate the state of Tennessee, nor any county therein, with any debt, nor the payment of any money;

and the said state board shall look alone to the revenue derived from the operations of this act for the compensation designated in section 12 of this act, and if said revenue is not sufficient to pay each member in full, as per section 12, then the amount thus received shall be pro rated between the members. But if there should be a greater revenue derived than shall be sufficient to pay the members, as provided in section 12, such surplus shall be paid to the comptroller of the state, who shall receipt to the board for the amount received, and shall account for said money as other state revenue.

Sec. 18. Be it further enacted, That this act take effect sixty (60) days after its passage, and all acts or parts of acts in conflict with this act be and the same are hereby repealed.

Passed April 3, 1889.

BENJ. J. LEA,
Speaker of the Senate.

W. L. CLAPP,
Speaker House of Representatives.
Approved April 4, 1889.

ROBT. L. Taylor,
Governor.

A correct copy.

C. A. MILLER, Secretary of State.

President hall's Address.

Members of the Missouri Institute of Homeopathy—Ladies and Gentlemen.

The hands on the dial with rapid and unrestrainable onward movement have recorded the hours of another year to the time for our annual meeting. Although we realize how swiftly the moments have fled since last we joined in hearty handshaking, in loyal, fraternizing work and pleasure, the earnest, self-sacrificing physician in his ever untiring devotion to the grand labor of ministering to his ailing

and afflicted fellow creatures, feels most acutely what, withal, is embodied within the cycle of a year. To him is given the tasks, the hardships, burdensome cares and stern duties which education of conscience dictates he shall carry. What a pleasure then to meet again with those whose minds are in accord and whose sympathies are bound together for the highest attainments of our calling.

While contemplating the joy of our gathering here to-day, when all seems to depict life, energy and prosperity, we are called upon to pause, turn back a page; and read the names of three who will never more join us in these meetings. They are within the realm of immortality, "the undiscovered country, from whose bourn no traveler returns." We miss their kind faces, congenial companionship and potent help. The names of these whose spirits have crossed the "dark river" since last we met are: Dr. J. Hunter, Independence; Dr. Louis J. Olmsted, of Kansas City, and Dr. William C. Gaston, of St. Joseph. It was not my good fortune to be personally acquainted with either Dr. Hunter or Dr. Olmsted, but my relations with Dr. Gaston were of an intimate and happy character, he having been associated with me fifteen months. His death was a personal loss to me, his friend, and I cannot speak of him in terms high enough. He was a true, Christian gentleman, a young man far above the average in ability as a physician. He was well read in matters of general interest and was a most entertaining conversationalist. Had he loved his success in the profession would have been extraordinary. Much more could I say eulogistic of William C. Gaston, were it in place, but our necrologist will present a biographical sketch of each of our deceased members. While seeking material for this address, it was my intention

obtain a history of the institute. But finding meagre authentic records upon which to report, I can only submit the following sketch or

HISTORY.

A call for a meeting of the homeopathic physicians of Missouri at Sedalia was issued early in 1876. This call was signed by Drs. E. C. Franklin, John T. Temple, Wm. D. Foster, D. T. Abell and others. The purpose of the meeting was stated to be the organization of a state society.

On May 11th, 1876, accordingly the following physicians assembled in the Masonic Hall, at Sedalia, to-wit:

Drs. John T. Temple, E. C. Franklin, D. D. Miles, W. H. Jenney, D. T. Abell, W. L. Hedges, H. T. Cooper, Philo G. Valentine and S. B. Parsons.

The meeting was called to order by Dr. Abell. Dr. Cooper was elected temporary chairman, Dr. Jenney temporary secretary. A committee consisting of Drs. E. C. Franklin, Philo G. Valentine and W. L. Hedges was appointed to draft a constitution and by-laws; this committee soon after submitted their report which was adopted. The organization was named The Missouri State Homeopathic Institute. The election of permanent officers then resulted as follows:

President, John T. Temple; vice-president, D. D. Miles, general secretary, W. H. Jenney; provisional secretary, D. T. Abell; treasurer, W. L. Hedges; board of censors, E. C. Franklin, W. H. Jenney, H. T. Cooper. It appears from the record that after the severe labors incident to the above, the gentlemen adjourned for refreshments, afterward assembled, read and discussed several interesting papers, appointed bureaux for the year and adjourned.

The second session was held at Boon-

ville, May 9th, 1877. Dr. D. D. Miles, vice-president, in the chair—the venerable president, Dr. John T. Temple, having died in the interim. At this meeting a fitting eulogy was delivered by Dr. Philo G. Valentine on the life and labors of the first president of the institute. The papers read were interesting. They were fully discussed and much harmony prevailed. The secretary's report shows that the sum of \$45 was collected for dues and for membership during the year. Meetings have been held each year since. At Kansas City and St. Louis several times, at St. Joseph, at Sedalia and at Hannibal. A three days' session was had at Kansas City in April, 1888, and the success of that effort has resulted in the three days' session we now enter upon. From a nucleus of nine members at its organization, the institute has grown with the advancement of homeopathy in the west, to its present strength and numbers. Through the labors of the present secretary the proceedings of the meetings have been brought under thorough order and system.

I cannot pass this subject, ladies and gentlemen, without publicly acknowledging the splendid, well planned and systematic work accomplished by our genial and worthy general secretary. With great zeal for the duties of the office, and a remarkably clear insight for everything beneficial to our society, to his efforts is due, more than all other causes, the augmentation of the institute during the past three years. The present enrollment shows a membership of 153; with six officers, three censors and ten chairmen of bureaux. That the homeopathic physicians of Missouri and the west are taking a firm stand for the advancement of their interests, is evident by the rapid growth of the institute during the past three or four years. During the past

three years 65 new members have been admitted. It is destined to become one of the largest and most influential state organizations in the country. And it is famous from ocean to ocean—and even in Europe, for the excellence of its papers, and high standard of the discussions at its annual sessions. The time has now arrived when the institute ought to be an incorporated institution, with a revised and well-digested constitution and by-laws. The present organic law is crude, incomplete, and inadequate to the demands of the times.

Since our last meeting considerable effort has been put forth—one way and another, having for its object the appointment upon the Missouri state board of health of a representative homeopathic physician. Although nothing tangible has come of this effort up to the present time, and although many vexatious annoyances have been encountered, yet, by strong concertation and unity of action on the part of members of the institute, this matter will, I believe, promptly receive due recognition. Thorough organization is necessary however, if we shall accomplish our purpose. In this connection, I feel it incumbent upon me to warn you against the evils of factional striving. There can never a more pernicious or harmful element creep into a great organization like ours! Nothing good can ever come of it, "In union there is strength" remember, and our growth and attainments depend largely upon the combined strength of our forces. Let us have active discussion as to the best plan to adopt in order to secure this appointment, and let no personal prejudice or differences influence against the common welfare. Our representative should be one eminent as a scholar, a physician, and homeopathist. He must have a comprehensive knowl-

edge of hygiene, and as a sanitarian be especially fitted—conversant with all the best and latest methods of preventing contagion and disease. He must have a knowledge of national and state municipal and medical laws. A man of broad and comprehensive ideas, large acquaintance and personal influence, and who will serve the interests of homeopathy with fairness and constancy.

PUBLIC ASYLUMS.

Notwithstanding the fact that in several states of the union, homeopathists as a school of medicine, have long since received recognition and proper control in many eleemosynary institutions, we have as yet no representation in any such asylums in the state of Missouri. This unjust and unreasonable condition of affairs certainly cannot be ascribed to unfairness on the part of the thousands of intelligent, right-doing people of the state, but, first, to unjust legislation, a direct result of the dominant school having gained the strongholds and fighting madly against the acceptance of that which the people desire.

Secondly, to the inactivity of the members of our own school, heretofore failing to do their best to accomplish the best; resting in lethargic revery as if arousing to action would result only in loss of time, energy and means, with final failure!

Members of this society, are we true disciples of the greatest foe to dogmatic principles in medical practice who ever lived—Samuel Hahnemann? Then let there be prompt, telling work in this direction. Homeopathy reckons among its patrons everywhere a large and steadily growing number of the most intelligent and wealthy class of citizens, who do their own thinking and recognize well the truth, certainty and great superiority of the application of similia. Moreover

they pay a very large proportion of the taxes of the state. Unjust discrimination against the only science of therapeutics must not be allowed to continue. We must have equal rights with old school medicine.

Apropos of this subject we have in the *Homeopathic Recorder*, March 15, the following example of the superior advantage of homeopathic treatment of the insane:

"The Springfield (Mass.) Republican has a highly gratifying notice of the report of the Westboro asylum," the only one (in Massachusetts) in which homeopathy is the basis and standard of medical treatment," yet, "it has reported a large and advancing rate of recovery from insanity among its patients, while other New England hospitals generally show a small and declining rate." And this is the more remarkable inasmuch as 400 of the 800 patients were not new cases, but came from other asylums, "and it is a well-known fact that few recoveries occur among the chronic insane." From less than 750 patients, Westboro reports 133 recoveries in a given period, while in the same time Danvers from 1,500 reports 140 cures, Taunton 109 from 1,150 cases, and Worcester 155 from 1,400 patients."

MEDICAL EDUCATION.

The past year has been marked by the rapid growth of a strong sentiment throughout the country in favor of inaugurating stringent requirements in medical education. The profession are fully awakened to a realization that the present system of teaching, and requirements for the degree of doctor of medicine is disastrous. In these times the public demand that physicians shall be prepared and equipped by a thorough education in medical science and its collateral branches.

Nor is this all, the physician of to-day, if he shall succeed, if he is to aid in elevating the dignity and standard of the profession, must have the advantage of a good business training, together with certain peculiar social and personal qualifications, an extra stock in trade as it were. No common material. More exacting demands are made, too, by the people of homeopathy than of old school doctors. It is conceded that only a meagre portion of the necessary medical knowledge can be secured in the time at present required for preparatory study and attendance upon lectures by most of our medical colleges. Many practitioners of medicine to-day, were they asked, would tell of personal disappointment, the result of a too limited preparatory education, and hurrying through the college course in the shortest time possible to secure a diploma. It meant harder study and harder work in many ways during the early years of practice. Both preceptors and students begin to realize the momentousness of the subject. Some of our foremost colleges, (8 out of 14 I believe) recognizing the need of the times, and with praiseworthy ambition to place the standard higher, now require attendance upon three full courses of lectures of at least six months each, before presenting for final examination. We want no "Diploma mills." What we do want is a longer course of study, a better teaching in the lecture room, laboratory, dissecting room and clinic. Let us support only those colleges whose requirements are high, and whose faculties are composed of teachers and professors of acknowledged skill and learning. Showing something of what is being done in this direction, attention is called to the action taken by the American institute of homeopathy at its session of 1888, and to the report of the committee on

medical education, which, in part is as follows:

"What, therefore, shall be required of a student who proposes himself as a matriculant in a medical college, and is a candidate for the degree of doctor of medicine? Personally, we say that the applicant if he is not a graduate of some college or other institution of learning, should at least have a good English education, that will include mathematics, outlines of history, ancient and modern, elementary chemistry, and in addition to the above, we earnestly recommend that he should be conversant with Latin and Greek, or at least one foreign language. When a student comes without any academical testimonials or first-grade certificate an examination should be made upon the above named subjects, excepting in Latin and Greek. We recommend that every institution whose diplomas we recognize hereafter shall require the candidate to study medicine four years and take three courses of lectures before making application for the degree of doctorate, and the term of lectures in the college course shall be uniformly for a period of not less than six months, thus making a complete semester, in accordance with the custom so long prevailing in the old country. We would earnestly recommend, however, that the term be prolonged to at least nine months. Let our colleges keep up with all scientific advances and our motto be, "*Scientia et veritas sine timore*," and let us teach our students "the best that has been thought and taught by medical philosophers and authorities of ancient and modern times, and our graduates will then form a veritable "*corps felite*." When we send out such physicians they will be so disciplined as naturally to develop self-culture, which above all other characteristics is the one that will in practice not only give

precedence and success, but finally eminence in the profession. Such physicians will naturally avail themselves of post-graduate instruction, in accordance with the aphorism. "*Qui non proficit deficit*," etc. In conclusion the following resolution was offered:

"That, from and after the year 1890, the American Institute of Homeopathy will not recognize the diplomas of any college requiring less than four years of study and attendance upon three annual courses of lectures of at least six months each." Subsequent to discussion this resolution was amended by changing the date "1890" to 1891, and the term "four years course of study" to "three years." It was then adopted."

The following resolutions were also adopted:

"Resolved, That the American Institute of Homeopathy heartily indorses the report and action of the intercollegiate committee in requiring from all graduates from medical colleges after the sessions of 1890-'91 at least three years of medical study, including three full courses of didactic and clinical instruction of at least six months each.

Resolved, That this institute will after 1891, require from all applicants for membership graduating after that time a full compliance with the above requirements for graduation."

PAPERS.

I need scarcely mention the importance of maintaining the number and high standard of the papers read before this society. Each member should feel it a personal duty to be present, read and discuss their papers. Allow me to call your attention also to the resolution adopted at the session of 1887, i. e.: "All papers read before the institute shall be referred to the committee on publication, and those papers worthy of publishing shall

at once be sent to some reliable homeopathic journal to be published, as having been read before the Missouri Institute of Homeopathy. This resolution should be complied with, as by this method thousands read the transactions who otherwise would not. It is my desire, in closing, to thank you all, my friends, for the honor bestowed upon me and the compliment paid the city of St. Joseph in electing me to the presiding office for the present session of our society. Coming as it has, entirely unsought and unexpected, the compliment is fully appreciated. Regretting the unavoidable causes necessitating absence from some of the past sessions, my wish for the future is that nothing shall prevent my active participation.

The Missouri Institute of Homeopathy, composed as it is of the most excellent material in the west (and elsewhere, too, for its membership is not confined to the west alone) shall continue to be a power for good; it shall aid in banishing the darkness and prejudice until the light of the true science of healing shall absorb all that is fallacious and harmful—until the word homeopathist shall be synonymous with that of physician. With conscious pride we can now affirm the victory is ours!

Pot Pouri and Personal.

Dr. C. H. Fay is now located at Las Cruces, New Mexico.

The Minnesota Homeopathic Institute meets at St. Paul, May 21, 22 and 23.

A full report of the Kansas state society will appear in the next issue of *The Journal*.

To whom it may concern: The undersigned is sole proprietor and responsible editor of *The Southern Journal of Homeopathy*.
G. G. CLIFFORD.

Dr. C. N. Cooper, late of Winchester, Ky., has removed to Cincinnati, and located at 278 W. Eighth st.

Dr. F. E. Chapman has removed from Forest Hill to Watsonville, Cal., and is now associated with Dr. Copps.

Dr. George Lyons, who for the past year has been with Prof. Pauly, of Cincinnati, has removed to Selma, Ala.

Dr. A. L. Monroe, corner of 3rd Ave. and Chestnut street, Louisville, Ky., will receive subscriptions for *The Journal*.

Dr. H. F. Fisher and bride visited the Alamo city in the latter part of April, and have now returned to and permanently located in Austin.

Dr. R. Murphy, a recent graduate in the doctrines of Hippocrates, swings his shingle to the breezes of the Crescent city. Success to you, doctor.

Mr. P. Engelbach's smiling countenance greeted our sanctum on the 22nd ultimo. He was in attendance on the Texas Medical association, and exhibited such an assortment of surgical instruments as dazzled the eyes of these "regulars."

Dr. Howard Crutcher, the energetic secretary of the Southern Homeopathic Association, is spending the month of May in Chicago. To our Lake City brethren. Listen attentively to what Dr. Crutcher tells you about the south, hearken unto his counsels and come to our meeting next November.

Dr. M. B. Campbell, physician in charge of the penitentiary at Joliet, Ills., paid Texas' metropolis a short visit, on his return homeward, from our sister republic. Southern climes have greatly benefited the doctor's health, and our doors are open for him, when he makes up his mind to locate in our midst.

Southern Journal of Homeopathy

NEW SERIES
NO. 6.

San Antonio, Texas, June, 1889.

OLD SERIES
NO. 67.

• • Editorial • •

To the Profession.

The State Association which finished its session in Fort Worth, Texas, a few days ago, among other transactions levied an assessment upon its membership, for the purpose of placing in the hands of the legislative committee a fund wherewith to pay "the expenses of having our school properly represented before the next lawmaking power that assembles in Texas." This is a step in the right direction. Heretofore a few men devoted to our principles and having at heart the great good to be accomplished by Homeopathy, have first worked for the money that they had to spend in the payment of expenses, and then cheerfully lose their time and talent toward the instructing of the multitudes into the benefit of our teaching. To the profession generally, it is not known, and consequently by them not duly appreciated that through the efforts of individual exertion and influence only have we been enabled to stem the torrent of adverse legislation that bigotry has poured upon our cause, and if it had not been for those few gentlemen who so well upheld our cause we would long ago have been in a much worse situation than we now are. Hence it is with not only pride and satisfaction, that we

note the action of the association, but also with an abiding faith in the results to be accomplished. It is a good work well commenced to be kept up and continued until the time when all nations, kindred and tongues of this world shall humbly acknowledge the incalculable benefits of Hahnemann's divine teachings for the relief of mankind. But for fear of being misunderstood, either purposely or in fact, "The Homeopathic Medical Association of Texas" desires to place itself and the membership aright before the world, by devoting the fund toward "paying the expenses of having our school properly represented before the next lawmaking power," etc., in a legitimate way. We do not propose to wage war upon any body or any legitimate school except upon ignorance and bigotry, but against every thing and every body we propose to defend ourselves to the very best of our ability. We are the representatives of the true school of medicine and we know it. We are entitled to all the rights of recognition before the law, and of the world, and we intend to defeat any and all legislation which attempts to deprive us of those rights, or any of them to which we are justly entitled.

The gentlemen to whom was assigned the task of doing this good work will have a great deal to do and their earnest and united efforts will doubtless accomplish much good.

Why Is It?

The meeting at Fort Worth, Texas, of our state association has made the writer enquire, why is it that so few of our brethren attend? or to put it a little differently, why do not all those whose interests are concerned come to these councils and attend their own business affairs, instead of leaving others to bear the loss of time and payment of money for not alone their own share but also of those who stay at home, earn their incomes and save the money it would require to attend the meeting; but try all we can to solve the conundrum it still remains unanswered. True, a large per cent. of the delinquents give a pretty good excuse, viz: "can't leave my patients." From the number of the brotherhood who render this sort of an excuse, it would seem that the absentees are doing a greater and a more important work than those who do have the time to devote to the work of the convention and the general good of all. In fact that it is the idlers of the profession who go to these meetings, and yet when one looks at the faces and names of those who answered to roll-call on the 4th and 5th of this month at Fort Worth, one must conclude to the contrary. There is no doubt but that with some few the excuse is a true one and that an injustice would be done some isolated cases of patients, but in a large majority of instances it seems very improbable, particularly when the identical brother year after year absents himself and each time gives the same reason. Dear sirs and brethren, these things ought not to be so. You should not leave for others the task which in all good faith you owe as a debt to your associates. Business of importance is transacted at these meetings, which binds not only those present but every one who practices our school of medicine in the state and you are one of them. You

should be there and with your advice and experience help us to work in the right direction, particularly is this true if you are located in a state like ours where our school has so few representatives. And even though the work could be transacted as well without you as with you, yet your presence adds numerically moral support and influence that has a good effect, for you must know that strength of numbers adds greatly toward inspiring respect for any organization, and its supporters are encouraged when they see it well represented, while on the other hand if a state meeting is lightly attended, and its large practitioners and most influential members stay away, the public are very apt to have a poor opinion of the whole concern. It is to be hoped that other associations will do better and be influenced by this article and adopt such measures as will inspire respect for us and our members and present to the world such an imposing array of faces that even the most sceptical will be forced to concede that no matter what else may befall us, we can never be lonesome for lack of associates.

Attend the Institute.

The American Institute of Homeopathy meets at Lake Minnetonka, Minnesota, the 24th of June, for the purpose of sowing broadcast and into a fertile and in many places an almost virgin soil, its seeds of truth and knowledge. It is a good place for any one to go to, be he an M. D. or layman, he will be sure to see and hear of matters that interest him individually and everybody in general; every one ought to go, but particularly is it the duty of the duly elected state society representatives to be there; in fact that is what they were elected for, and their brother members look to them to keep the pledge they made when they accepted of the election. It may be that they did not,

in words "thank the association for the honor conferred upon them and pledge their honor to do," but they all the same did accept and are thereby bound in good faith to carry out their part of the compact, for if they accepted and don't go, some one else no doubt would have taken their place had they declined. Each state society looks to their duly elected representatives to advertise to the world through the Institute that they still live and flourish. Besides, no one can attend without great personal profit and enjoyment. Looking over the many good things in anticipation, the writer would not miss seeing and hearing Dr. Phil Porter on his favorite specialty for a good deal more than the time and expenses of the trip; if nothing else it will be a reminder of the youthful days when we sat on the hard amphitheatre benches and listened to his lectures. Verily, we will feel good to be young again. Gentlemen, one and all, we will be there, from Texas.

IN MEMORIAM.

WM. STATES LEE, M. D.

Wm. States Lee was born of good old English stock in the city of Charleston, South Carolina, in the year 1828. In 1836, his father removed to Alabama, where several members of the family yet reside, honored and trusted citizens. About 1847, Dr. Lee returned to his native city of Charleston to prosecute the study of medicine under the tutelage of a relative who was a member of the faculty of the medical college.

In 1850 the medical college of the state of South Carolina conferred upon Wm. States Lee, the degree of doctor of medicine and he returned to Alabama where he practiced his profession for some years; he then removed to Pensacola, Florida. At the inception of the civil war he became private surgeon to the 5th Alabama

regiment, until the troops were removed to the seat of war in Virginia, when he was requested to appear before a medical board for examination and received a commission as assistant surgeon C. S. A. In February 1863, he was ordered before a medical board at Charleston and received a commission as surgeon C. S. A., which rank he held until the cessation of hostilities in 1865.

The reverses of war which brought disaster and financial ruin to so many southern homes did not spare our friend, and accompanied by his wife and infant daughter, he returned to Pensacola to gaze upon the ashes of his former home. His noble wife had followed his fortunes in the field, sacrificing every comfort to be near her husband, and aid in the care of the sick and suffering.

Together they take up the battle of life anew. In a short time his dignity and real merit command their just reward, and he is in possession of the confidence of the people. He received the appointment of port physician and was in this capacity in charge of the Marine hospital at Pensacola. About 1872 he first began to investigate homeopathy, conscientious in all things there could be but one result, and Dr. Lee's name was added to the long list of physicians who have adopted the practice of our beautiful science. Shortly after this he passed through an epidemic of yellow fever. The triumphs of homeopathy in his hands were such as to strongly confirm his faith in the wisdom of his decision.

In 1874 Dr. Lee came to Dallas, Texas, passed the examination of the medical board as required by law, and thus became the pioneer of homeopathy in Dallas. Unheralded by any of the advertising dodges of the day, he quietly went about winning the confidence and respect of the people; he explained to all who inquired, the truths of homeopathy, demonstrated

them in his practice and did more than any other has done, to place our science upon the respectable basis it occupies to-day.

In May, 1887, he suffered an attack of malarial fever from which he had not fully recovered, when the disease which finally was the cause of his death attacked him. Three separate operations were made for the removal of diseased bone, yet the disease continued to make inroads upon sound tissue. In November 1888, amputation of the right limb at the lower third of the thigh was made, symptoms of septicemia supervened, and for weeks life hung in the balance; at length he slowly improved and we fondly hoped he might still recover. On Sunday, January 24th, 1889, he suffered with severe headache for several hours; at about 1 a. m. of the 25th he had a convulsion which was followed by others until 9 p. m. of the same day when they ceased. He was not conscious after the first convulsion, and he lay in this condition without voluntary movement until 11 a. m. of the 31st, when he peacefully passed away.

Thus closed the earthly career of one whose life of purity, devotion to his family and to duty and faith in God is worthy the emulation of us all. Dignified in his deportment, genial in his disposition, tender as a woman in his sympathies, courageous as a lion in his defense of the right, he won the love and respect of all. During the long months of his suffering it was rarely his brow was shadowed by a cloud, and he greeted his friends with pleasant words and smiles.

Of deep religious convictions, he was a life-long and devoted member of the Episcopal church, in which he for many years held some responsible lay position. One of the most touching tributes to his memory was the presence at his funeral of a number of poor people with their children who had remembered his kind-

ness to them, and came to pay this last tribute to his goodness. He leaves a devoted wife and two loving daughters, about whom his life remains a sweet incense which will glow with fervor until that day when they shall meet him and dwell with him forever.

To Scoffers at Homeopathy: Read and inwardly digest extract from report of the Illinois State Penitentiary, at Joliet:

"The question has frequently been asked as to the relative expense of running the hospital as compared to the allopathic system. In answer I will invite your attention to the table of comparisons compiled from the printed reports of the two Penitentiaries of this State, the Chester prison being under allopathic and the Joliet prison under homeopathic supervision. The average cost per man at Chester, taking in the whole prison population, from 1882 to 1886, was about \$1.62 per year. At Joliet, 61 cents per year. The average prison population at Joliet being between fourteen hundred and fifteen hundred, thus represents that number of dollars saved to this prison each year."

Joliet Penitentiary: Medical supplies October 1, 1882, to September 30, 1886, \$3,648.82; number of convicts, 5,986; average cost per man per year, 61 cents.

Chester Penitentiary: Medical supplies October 1, 1882, to September 30, 1886, \$4,266.67; number of convicts, 2,623; average cost per man per year, \$1.62½.

Joliet Penitentiary: Total number of days lost October 1, 1880, to September 30, 1886, 45,330; average in prison October 1, 1880, to September 30, 1886, 8,851; average per centum, 5 12-100 days to each man per year.

Chester Penitentiary: Total number days lost October 1, 1880, to September 30, 1886, 37,386; average in prison October 1, 1880, to September 30, 1886, 3,402; average per centum, 10 98-100 days to each man per year.

To the state societies of Kentucky, Ohio, Kansas and Texas: We will do justice to the confidence reposed in us in due time. You have favored the medical profession with much new and good material and we will do our part in placing it in every library.

Our Letter From Dr. Fisher.

NEW YORK AS A MEDICAL CENTRE.

In Mid-Ocean, May 7th, 1889.

Dear Journal:

America's metropolis is in fact becoming the rival of Vienna for first honor as medical and surgical centre. There everything is centered under the management of one great University, while in New York the medical and surgical work is divided out among a score of immense hospitals and the teaching is done in almost a dozen colleges. If New York's advantage for study and observation were concentrated under one management, as in Vienna, there would be neither need of nor justification in the medical student going abroad, even at the present time, to complete his professional education. It could be finished right here, and Vienna would be relegated to second place beyond the question of a doubt. Even as it is, there are several physicians in attendance upon the polyclinic and post graduate course here, at this time, who have attended the university and clinics at Austria's capital who pronounce New York advantages superior to those to be found abroad.

And this claim and prediction is not unfounded; just take a survey of the field! New York has a million and a half of people, and above three million within a radius of ten miles, from which to draw clinical material, to say nothing of having the whole United States to call upon, which her surgeons do most liberally. She has Wyeth, Gerster, Helmuth, Doughty, Bull, McBurney, Abbe, Briden, Weir, Wilcox, Markoe, and other able and brilliant surgeons, and Thomas, Emmett, Munde, Hunter, Wylie, Sims, Jr., Nicolls, Hanks, and other gynecologists, than whom there are none more able, not excluding Lawson Tait or Mar-

tin. No one city in the world has so large a number of really competent men, and if they could but be brought into one school, and their clinical work be concentrated, what a grand field would be presented the profession of America for clinical observation and study. If this great desideratum could be accomplished, the whole world would be brought to pay homage at the feet of America's surgeons and gynecologists.

Of hospitals, New York boasts a large number, chief among which are the New York, Roosevelt, Presbyterian, Mt. Siani, St. Luke's, the German, the Cancer, the Woman's, Bellevue, the Hahnemann and Laura Franklin, Ward's Island, Charity, with a large number of others, and numerous female institutions, as the Hel-muth House, Wylie's Sanitarium, Sims' private hospital and several more. Several of these institutions are simply palatial and the number of beds provided for the sick and afflicted in the great charities of this city run away up in the thousands. Every treatment—every investigation known to modern medicines, is to be learned by the medical student and post-graduate investigator at these great institutions, while every operation known in surgery or gynecology is here performed by skillful operators, who are uniformly courteous and attentive to the inquirer after knowledge.

Of Colleges, there are several, the most prominent being the College of Physicians and Surgeons, Bellevue Hospital College and the New York Homeopathic. The students of all of these institutions are admitted to the medical and surgical amphitheatres of all of New York's hospitals not under private management, as are also physicians attending the polyclinic and post-graduate schools.

It is not to be gainsaid that New York is a great field in which to round off our medical and surgical studies and that her

advantages in this respect are greater than are those of any other city in the United States. What would they be if these great men, these great colleges and these great hospitals could be brought together under one great roof?

My studies have been confined to surgery and gynecology, and during the past two months I have seen every operator named, with one or two exceptions, exhibit his skill. This experience includes nearly every operation known to modern times and naturally I can but feel that the experience has been a great one. Of all the operators, none is more skillful and more certain of what he wants to do than our own Helmuth. The most important operation I saw him perform was a laparohysterotomy for Utero-ovarian fibro-cystic myoma, an operation requiring great skill and daring. It was most successfully performed, the patient recovering promptly.

Another very skillful operator is which homeopathy may well be proud, its Dr. Doughty. It was my great delight to see him operate successfully for pericardial effusion—the first time in America that the pericardium has been incised for dropsy of that sac, and a drainage tube inserted. The patient was a child fourteen years of age and in a very reduced state of health, and the operation was only intended as a palliative measure. Twelve ounces of fluid were drawn off through the incision, and when I left New York (this letter is being written on ship-board in mid-ocean) the patient was doing well. But few men have actually seen the human heart uncovered, performing its function and through Dr. Doughty's courtesy the writer is one of the few.

Gerster, the great anti-sepsis man, is the boldest and most bloody operator in New York; Wyeth, he of the work on surgery, is the most gentle and obliging to onlook-

ers; Markoe is the Father of them all; Bull is brilliant but knows it a little too well; Bridden is an "old school" operator, but keeps well up with the times and is quite obliging; McBurney, of Roosevelt hospital, is most careful and systematic, and Abbe, of St. Luke's is, to my thinking the coming man of New York, quiet, careful, thorough and bold without "playing to the gallery." McBurney, Bull and Abbe are the favorites. The work of the two former is unfolded and before the profession; Abbe does all the others do and is developing genius of a high order. In the judgment of many he is the most promising young man in New York to-day.

It is exceedingly gratifying to note the position of the young men in the field of surgery. Of all mentioned in this letter, only Helmuth, Markoe and Bridden, are above fifty, while many of the best are not yet forty. Bull, Weis, Abbe, Dougherty, Wilcox, Murray, McCosh, Pilcher, Gerster, Dawborn, Powell and a number of others are not beyond forty, and some of them scarcely thirty, yet all are performing all the capital operations, and many are developing new points of incalculable value to suffering mankind. This is the young man's age and in the field of surgery as elsewhere the energy and vigor of youth is plainly forging to the fore.

It has been my pleasure to attend the commencement exercises of the New York Homeopathic College, and the banquet of the Alumnae Association of this institution, to become acquainted with many members of the faculty and to learn of their present work and of their plans for the future, and will devote a few words to our own interest in New York before closing this letter.

The New York Homeopathic College is one of our most worthy institutions of learning. Among its faculty are "the

only" Helmuth, "the only" Allen—the rightful successor of Dunham and Herring, St. Clair, Smith, Dowling, Dougherty, Dillow and others of much strength of mind in medicine, who, together composed corps of teachers having but few equals and no superior in our school. Their term is long, their teaching thorough and their examination strict, consequently their diploma possesses a real value and the timber they turn out is usually first class. Unfortunately there is a sore-headed faction in New York headed by Guernsey and Hills, of the *Times*, who have a following personal in character, who are doing all in their power to hamper this college, and even more unfortunately, these men are upheld in the American Institute by a few superannuated individuals who fail to comprehend the situation, and as a result the College has been made to suffer. Through political friendships and machinations the "outs" have control of the Ward's Island Homeopathic Hospital, and of the Hahnemann Hospital also, and the College has had to look elsewhere for clinics for her classes. Fortunately, as an offset to what I unhesitatingly term the pure cussedness of the "outs" and their friends, the College has a corps of able and warm-hearted supporters who are lifting her squarely over the head of all opposition to a high plane of prosperity, and from now on she is going to be able to snap her fingers in the faces of foes without our school and meaner foes within, who would sell our honor and who have already sold their own for a miserable bit of milk and water approved at the hands of the old school society of New York. A magnificent new college building is being erected and will be ready for occupancy this fall, and the Flower Hospital being erected on the same lot will afford a fine advantage not previously possessed by the institution. Besides this it pos-

sesses the Laura Franklin Free Hospital for children, and the Helmuth House is freely open to its senior classes through the kindness of Dr. Helmuth.

At the Alumnæ Banquet, the Dean, Dr. Allen, announced the intention of the college, as soon as it got into its new home, of working into a post-graduate course for the benefit of the profession at large—a desideratum most devoutly to be wished. This done and the entire Homeopathic profession should give the New York school a hearty support, and it should, unhesitatingly, as I believe it will when it understands the cost, give as hearty condemnation to the disgruntled and traitorous few who, having won all they have and are by Homeopathy, are now fighting her only teaching institution in New York and favor trailing her honorable banner in the dust of Allopathic spoils. The man or men who would haul down the flag which floats at our masthead—insignia as it is of the grandest and livest law in therapeutics ever yet expounded, is unworthy of honorable association with believers in Homeopathy's law, and why they are longer tolerated in our ranks or their official organ recognized by our National Association, is one of those things not comprehended by a disciple not in the select circle of ancient mariners among whom the bonds of friendship seem to be stronger than the bonds of duty.

The writer is firmly of the opinion that the New York Homeopathic College is entitled to the hearty support of all true friends of Homeopathy tributary to it and of the warmest approval of the American Institute, and he sincerely hopes that the national body will not cavil at its coming meeting over the technicalities of the question, but that a condemnation which is just and deserved, may be unhesitatingly bestowed upon the traitorous few who would tear down our college if they dared.

During my stay in New York I was the recipient of kindness at the hands of several members of the profession there, and was also allowed the pleasure of attending a meeting of the Massachusetts Medical Meeting at Boston. Of these and some other things I shall speak in a letter for your June issue. I am now with my wife in mid-ocean, three days out from New York. Should we meet with no mishap will reach Liverpool on the 12th inst, and London a day later, and will give you a letter about the hospitals of that city for your July number.

C. E. F.

News and Comment.

In the last issue we called attention to the overthrow of the State Board of Health by the legislature of Illinois, and expressed a serious regret that an efficient medical body which had labored alike for public good and professional advancement should have met a fate so inglorious. It happens, however, that the Board will live, although the appropriation for its maintenance is cut down from \$40,000 to one fourth of that sum.

* * *

Medical men have differed, and will continue to differ, on questions of public policy as it pertains to professional specialties. Restrictive legislation is one of the questions upon which few seem able to agree. A prominent physician of Tennessee has lately expressed the opinion that all men who desired to practice medicine should be accorded the privilege. In support of his position he asserts that people will employ whoever they please, no matter what laws are passed. This may be true, but we must maintain that lawbreakers ought to be punished. The peddler who would appear in a community and dispose of a quantity of spurious jewelry would be punished under the

common law for obtaining money under false pretenses. How is the case altered when the itinerant styles himself "Doctor," and, by stupendous lying, swindles ignorant people out of money? If John Dae or Richard Rae should appear at a farm house and dispose of a diseased horse, the farmer would pursue them and demand a return of his money under a threat of imprisonment. Why should the victim of the medical pretender not also possess a legal redress?

* * *

Some months ago a medical editor who knows a good deal more about physic than he knows about political economy, undertook to instruct his readers on the danger of taking free trade *quinine*. Now we are sorry for this editor, inasmuch as *quinine* is a bomb loaded with a material deadly to trade restrictions of all sorts. The drug was for a long time imported, if imported at all, under heavy fines, said to be imposed for the benefit of "American labor" and practically called "protection." This policy of fining foreign merchants, who in turn recouped from American consumers, succeeded in building up a vast monopoly for one or two firms, in proof of which it may be stated that a lately deceased member of the firm of Powers & Weightman left an estate valued at fifteen millions of dollars. Finally a demand came for the repeal of the duty on *quinine*, the people appearing to believe that, after all, the consumer did have some connection with the payment of the tax. The duty was repealed by an act introduced by Congressman McKenzie, of Kentucky. Now we are told that "cheap foreign labor" is flooding this market with a wretched quality of *quinine*. This complaint is extremely ridiculous in view of the fact that Powers & Weightman, *the Americans*, own and operate *German* chemical works for the express purpose of supplying the American consumer!

The solemn truth is, no part of the "protective" system is more indefensible than that which imposes a tax upon medicines and surgical instruments. The duties fall with crushing severity upon many thousands of poor people, and if anybody is benefitted thereby we should be pleased to know who it is. The notion that a tax is a blessing may have an abiding place in some people's minds, but all such notions will, along with the remnants of mediaeval therapeutics, give way to the shinning light of all powerful truth.

* * *

Some days ago a newspaper of respectability announced that it had received special matter from Europe by means of submarine wire. We decline to credit the story and are inclined to believe it the dreamy fabrication of some reporter. In the first place, news cannot be sent over a submerged wire, any more than a spiritual force can affect the human organism. The paper bearing the message would become soaked and fall to pieces in transit; and, in addition, the wire would break in being pulled such an immense distance with something akin a kite-tail trailing after it. All such stories about sending messages over wires are promptly sent to the waste-basket, along with reports of cures by high potencies. In conclusion, we would ask one question: Granted that it requires a pound, or a half-pound, or a quarter-pound, or a dram, or at all events a *material quantity* of *mercury* to cure a case of dysentery, how many pounds of lightning would it require to "peel" a ton of limbs and bark from a forest oak?

* * *

A great man once advised his son not to study logic, assigning the reason that the world was moved by prejudice, not by premises and conclusions. Napoleon de-

clared that imagination ruled the world—and perhaps it does, although the Allopathists and the faith-curists might encounter some points of difference along here. All of which leads one to remark that the Homeopathic profession is burdened with a surprisingly large crop of bigots, who are, just like their Allopathic antagonists, ready and anxious to pass sentence of death upon their equals, upon precisely the same ground that the "Regular" declares Homeopathy to be fraudulent. "I do not *believe* in the thirtieth," says the Homeopath; "Nor do I *believe* in your third," echoes the Allopath. Such prejudice is hardly creditable to a christian civilization.

* * *

Several years ago Dr. E. H. Pratt, Chicago, presented a paper to the Illinois Homeopathic Medical Association on the subject with which his name is associated the world over. As a matter of course, he was, like Hahnemann, set upon by the smart fellows and the dull creatures of the world, and for a time it looked as if the great Chicagoian had loaded his house with dynamite for his enemies to set off to accomplish his destruction. In this year of grace, 1889, Dr. Pratt must feel a kind of exultation as he stands upon the high ground thrown up by his own unselfish efforts and surveys a vast field full of laborers who are every day vindicating the philosophy which has done more for humanity than all the warriors, as such, ever did in the world. Official surgery has come to stay until human nature and human ailments are revolutionized.

Dr. J. S. Mitchell, another Chicago physician, deserves mention in this place for having called the attention of the profession to the treatment of cancer by means of *Arsenic* locally applied in the form of trituration. We are much interested in Dr. Mitchell's investigations, and

we are sure he has done homeopathy great honor by bringing forth a method which is burdened with profound good to humanity.

SIMILIA.

Abstracts from the Ohio Meeting.

Dr. Palmer never used either morphine or alcohol in R. R. surgery.

Dr. Beckwith did not understand why he did not use alcohol, as it was a food.

Dr. Palmer thought it but a narcotic poison and that but one and one-half per cent. was absorbed into the tissues. He preferred to risk his patient's death from collapse rather than from the indirect results of narcotism.

Dr. Monroe thought alcohol the remedy in collapse; the condition found the vital organs congested; the heart weak from venous shock and the capillaries empty. A large dose of alcohol at such a time flushes the circulation, fills the capillaries, rests the heart and increases tissue oxidation, raises bodily heat, thus restores the equilibrium of the circulation. A second dose at such a time would be a mistake.

Dr. Owen thought that we could accomplish the same result with ten drops *jaborrandi*, as with a dose of alcohol.

Prof. Pratt's lecture on orificial surgery was listened to with wrapt attention, as was also Prof. Pauly's thoughtful paper on the same subject. Prof. Pratt demonstrated the difference between the cerebro-spinal and sympathetic nervous system, very much as follows: The voluntary system can pick up our bodies and carry them hither and thither wherever it pleases and controls the showy and outside functions of the body, but the sympathetic system is after all the most important, presiding as it does over the functions that lie at the root of life. When the cerebro-spinal is hurt there is noise, trouble, outcry, until things are readjust-

ed and set straight. When the sympathetic is hurt or hampered it suffers in silence and tries to do its best under the circumstances until it is no longer able to carry the increasing load, when there is a general systematic break down and the patient is a physical wreck. There is no condition of disease that does not find its start in blood stasis some where.—Dr. Pratt.

Most cases of insanity find their origin in selfishness in one of its myriad forms, and the next decade will find our mad houses taxed beyond anything in the past.—Dr. Buck.

The homeopathy of the future is an immense subject and one that no single man can compass. We know that like causes produce like results invariably and we cannot pluck grapes of thorns or figs of thistles, nor can we get one set of symptoms from *acon* and *bell* one day and another set another day. No, my brother! The law of homeopathy is nature's law and as such is as immutable as the stars, and its future will be but a repetition and all the exaggeration of the triumphs of the past.—Dr. J. A. Gann.

The most eloquent address of the banquet was that of Dr. Sanders in response to the toast, "The Ladies." It was in the Doctor's best vein which his friends know is inimitable, wit, humor, pathos, sentiment, poetry and poetical prose following each other so rapidly that his hearers were almost bewildered while their listening ears took in his impassioned words. At its close he was presented with an appropriate floral tribute from "the ladies."

In answer to the toast "Our Guests," the announcement of which was accompanied by the added information that Dr. Monroe hailed from Kentucky, that gentleman said that while he did not think that all the horses in his state were as fast as Tam O'Shanter's mare, or all the women as beautiful as Raphael's Madonna, while

all the men were not Henry Clays, as they would learn on that occasion, still they all averaged up pretty well and the average Kentuckian was the biggest man in the world and while his area of cardiac dulness might not be too great, his heart was generally all right. He dwelt at length upon the strides Homeopathy was making in the south under the fostering care of the Southern Homeopathic Association and the Southern Journal of Homeopathy. He urged upon the gentlemen present to subscribe for the said Journal and to attend *en masse* the meeting of the former at Memphis in November, when there was to be a genuine "love feast." In describing the South some twenty years ago, when only a few bold pioneers had attained a foothold, such men as Orme, Dake, Holcombe, Davis, Murrell and Green, he spoke of it as the place where

"The piercing caustics try their sickening power,
Emetics wrench a keen cathartic scour;
The deadly drugs in double doses fly,
And pestles beat a martial symphony."

Where

Some fall by Laudanum, some by steel
And death in ambush lurks in every pill.

Contrasting their lot very strongly with those who in their bodily ills depend upon

The toothsome dose that curbs the infant's pain,
That bids the love-lorn maiden love again,
That calms the anxious mother's aching breasts,
And gives to age new life, new hope, sweet rest.

That to the sum of life adds steady gains,
That from the ills of life takes many pains,
That makes it pleasant for all who live,
For those who take as well as those who give.

Dr. T. C. Martin's paper giving the result of the examination of the sexual organs of one thousand convicts was a most interesting and remarkable report by a very thoughtful and conscientious man, and inaugurates a line of investigation that, if continued as faithfully as begun, may add much of practical and useful information to the physician's stock of knowledge. Dr. Morton found some sexual abnormality in over two thirds of these subjects. That there is some connection between sexual abnormality and crime no truthful scientist will attempt to

deny, any more than that hysteria and insanity look to sexual disorder for cause. Dr. Morton is the son of an eminent Kentucky Homeopathist of that name, recently deceased, and bids fair to repeat his father's worthy record, his present habitat in the Ohio Penitentiary notwithstanding.

Prof. Walton proposed as a toast for the banquet, "What would the Knights be without the Ladies," but the C. D. Crank (pronounced seedy crank), who acted as toast master found that the intelligent compositor might leave off the "K" and thus create a *deuble entendre* of an embarrassing nature to a miscellaneous audience.

Drs. H. Pratt, of Chicago, and A. L. Monroe, of Louisville, were elected honorary members.

Your correspondent has never seen the Cincinnati banquet equaled, not even at the American Institute. The music, the flowers, the *menu*; indeed every thing was on a most magnificent scale, and it may be said without disparagement to the other responses, that the speeches of Drs. Buck, Gann and Sanders have rarely been equalled by doctors, in eloquence or choice verbiage.

President Walton said in his address that the man who wanted to be a good Homeopath must know all there was of Allopathy but the Allopath who knew all of Homeopathy would never be an Allopath.

On his response, "The Western Physician," Dr. Pratt said, "as the live active parts of the body are those at the nerve and arterial terminals, so the active part of a country is where the railroads and telegraph wires end." Thus he explains why the western physician is more active, energetic and go-aheadative than his eastern brother. Let us hear from the eastern brother.

The *Advance and American Homeopath*

were there in force in the persons of H. C. Allen and Frank Kraft, and the readers of the SOUTHERN JOURNAL will no doubt find these respective journals (June numbers) filled with the meat of the meeting.

Dr. H. C. Allen is just completing the work on Tuberculosis, upon which the eminent pathologist and microscopist Dr. Gregg was engaged at the time of his death from that dread disease.

The therapeutic portion of the work has been written entirely by Dr. Allen, and in the conscientious, painstaking manner that is his editorial habit. The work coming as it does from the hands of two of our sages promises to be invaluable to the profession in its especial department.

The Ohio Association has a methodical businesslike way of keeping up with the program and evolving short practical and pithy discussions that other societies should emulate. President Walton no doubt had much to do with the prominence given these features at this meeting. He is a hustler and no mistake.

All the physicians with whom your correspondent talked were unanimous in pronouncing the SOUTHERN JOURNAL one of the liveliest and best publications that our school contains to-day.

Prof. Sanders lays great stress upon the importance of position in the different stages of labor. A discussion following his paper elicited the opinion that births with the cord around the child's neck are very common—probably are in five out of six labors—and the equally important opinion that such children rarely exhibit symptoms of strangulation except where the cord is unusually short.

Dr. H. B. Van Norman, of Cleveland, has verified in a number of cases the statement made in an issue of the *Era* a year or more ago to the effect that a pregnant woman's pulse is the same lying down, sitting up and standing. He desires all physicians who are willing to as-

sist him in further verifying this symptom to report to him the result of their observations next April. The vast importance of a certain sign of pregnancy obtainable before quickening cannot be underated, nor will it be by the profession.

Kentucky Items.

Dr. E. S. Breyfogle is attending a post graduate course in New York. He will return to his practice in San Francisco in the fall.

Dr. Cooper of Winchester has removed to Cincinnati, and has been succeeded by Dr. Norris, formerly physician to the Ohio penitentiary at Columbus. Dr. Norris cannot fail to give satisfaction to the good people of Winchester, having spent some years in attending very "bad cases."

The new medical law in Kentucky has accomplished nothing so far beyond putting the legally qualified Doctors to considerable trouble and expense, and adding somewhat to the already plethoric purses of the county clerks. There has not yet been reported a single quack as "frozen out." Some oracular young Louisville Doctor tells us through a paper of that city that only doctors should be allowed to practice whose diplomas are approved by the American Medical Association. Now wouldn't that be a pretty mess? That antiquated hide bound myopic old dame to have control of the licensing power in our grand old commonwealth? Ye gods! One hundred able bodied doctors thrown out of employment; five hundred people deprived of means of subsistence; one hundred thousand of the state's biggest tax-payers and most enlightened citizens deprived of their family physician. Verily does the allopathic reasoning power seem to forsake him when he tackles state medicine, and the Kentucky regulars seem to have learned nothing by the Waterloo recently experienced by their New York and Pennsylvania brothers. Eternal vigilance is truly the price of medical liberty.

Ohio Homeopathic Medical Society.

CINCINNATI, May 15, 1889.

The Twenty fifth Annual Session of the Homeopathic Medical Society of Ohio was begun this morning at the Lincoln Club Rooms, there being present between fifty and seventy-five of the members, and other members coming by each arriving train. At 11 o'clock Dr. C. E. Walton, the president, called the meeting to order, and at once entered upon the routine business. The report of Censors was called for, but owing to the lateness of the hour, was passed over temporarily. The reading of the minutes was dispensed with, these being printed in the annual publication. The treasurer's report read by Dr. Beckwith disclosed the fact that the society is in funds and the outlook good. Drs. Palmer, Claypool and Hoyt were appointed the auditing committee. The secretary's report was an oral statement of the present condition of the society and the expenses entailed by his office. The committee on publication presented the printed transactions as their report.

The bureaux of registration, legislation and statistics were enlightened by an excellent paper by Dr. H. E. Beebe, M. D., of Sidney, entitled "Salaries of Medical Employes of Ohio Charitable Institutions," in which he contended that the pay was pitifully inadequate for the services rendered, and plead for assistance in raising the standard of ability with a corresponding remuneration.

Dr. Beckwith spoke adversely to the subject, claiming that the honor of political appointment was in many respects an equivalent for services rendered. He himself, although assured of a practice valued at 30 or 40 dollars a day, yet gave his time to a committee for five dollars a day. He believed that the public institutions were excellent training schools for

men who could not otherwise become specialists.

Drs. Palmer and Claypool came to the rescue of the essayist, defending his paper and arguing the necessity of not appointing incompetent or inexperienced men to public institutions especially as relating to Insane Asylum.

In the absence of the chairman of the Bureau of Sanitary Science, Dr. Beckwith took charge and introduced Dr. J. W. Clemmer, of Columbus, who then presented a paper entitled: "The Smead system of heating and ventilating, and its auxiliary the dry closet, for school buildings." Dr. Clemmer is an advocate for the system and his arguments in favor thereof were convincing. The experience of Drs. Owens, Claypool, Sanders, Gann, Beebe, Edgar, House, Pratt, Monroe and Beckwith called for and given, the majority defending the heating system, but speaking rather doubtfully of its application to the dry closet system.

Dr. J. C. Fahnestock, Piqua, read a paper on "Natural Gas" in which he rather assumes the negative side. He was answered by Dr. Claypool, of Toledo, who claimed that the deleterious effects claimed for the gas was principally owing to its improper use.

The chairman pro tem announced that instead of reading his paper he would present it to the publication committee and call upon the secretary to read a paper prepared.

1ST DAY.—AFTERNOON.

Hon. J. B. Mosby, Mayor of Cincinnati, addressed and welcomed the assembled physicians and their ladies. Dr. O. W. Lounsbury replied for the association. Dr. Walton, the president, next addressed the society. This was a masterpiece of composition interspersed with witticism and telling points.

The bureau of materia medica presented a continuation of the work of last year. Dr. Crank gave the "Etiology and Pathology of post-scarlatinal Nephritis," which was followed with its "therapeutics" by Dr. Owens.

Dr. Owens called attention to carbolic acid as one of the most frequently indicated remedies in this affection, and said that its chief characteristic, smoky urine, was found under no other remedy.

Drs. Allen, Parmelee and Rosenberger had experienced successes with Terebinth and Jaborandi.

Dr. A. M. Tracy presented a paper on "Food for Infants."

Dr. Munn read a paper on his clinical experience with "Salol and Passiflora incarnata."

Dr. Fahnestock's "case cured by Lachesis," elicited a discussion in which the diagnosis was questioned. Montgomery Co. society presented a paper on "Puerperal Fever."

"Vaccination Vagaries" by Dr. Kraft, in which he maintained that the ivory pure vacine point was as dangerous to the individual as the old school method.

In the evening the physicians of Cincinnati, entertained the members of the society at a banquet at the Gibson House, which for choice *menu* and excellence of service has not been equalled in the history of the association.

SECOND DAY'S SESSION.

Papers presented.—"The sexual organs of 1000 convicts," by Dr. Martin.

"The Rectum as a Disease Center," by Dr. Pauly.

"Orificial Surgery,"—an address by Dr. Pratt.

"Railroad Surgery,"—by Dr. Palmer.

"A new method of amputation at the ankle joint,"—by Dr. Deetrick.

"Posture and Labor,"—by Dr. Sanders.

"Diagnosis in Pregnancy,"—by Dr. Orpha. D. Baldwin.

Two papers on Salpingitis,—by Drs. Claypool and Parmelee.

Dr. A. L. Monroe was elected an honorary member. Next place of meeting will be at Cleveland.

Department of the Interior.

CENSUS OFFICE,

Washington, D. C. May 1, 1889.

To the Medical Profession:

The various medical associations and the medical profession will be glad to learn that Dr. John S. Billings, Surgeon U. S. Army, has consented to take charge of the report on the mortality and vital statistics of the United States as returned by the eleventh census.

As the United States has no system of registration of vital statistics, such as is relied upon by other civilized nations for the purpose of ascertaining the actual movement of population, our census affords the only opportunity of obtaining near an approximate estimate of the birth and death rates of much the larger part of the country, which is entirely unprovided with any satisfactory system of state and municipal registration.

In view of this, the census office, during the month of May this year, will issue to the medical profession throughout the country "Physician's Registers" for the purpose of obtaining more accurate returns of deaths than it is possible for the enumerators to make. It is earnestly hoped that physicians in every part of the country will co-operate with the census office in this important work. The record should be kept from June 1, 1889, to May 31, 1890. Nearly 26,000 of these registration books were filled up and returned to the office in 1880, and nearly all of

them used for statistical purposes. It is hoped that double this number will be obtained for the eleventh census.

Physicians not receiving registers can obtain them by sending their names and addresses to the census office, and, with the register, an official envelope which requires no stamp will be provided for their return to Washington.

If all medical and surgical practitioners throughout the country will lend their aid, the mortality and vital statistics of the eleventh census will be more comprehensive and complete than they have ever been. Every physician should take a personal pride in having this report as full and accurate as it is possible to make it.

It is hereby promised that all information obtained through this source shall be held strictly confidential.

ROBERT L. PORTER,
Superintendent of Census.

Homeopaths in Council.

THE THIRTEENTH ANNUAL MEETING OF
THIS SOCIETY CLOSED LAST EVENING.

The Homeopathic Medical Society of the state of Oregon closed its thirteenth annual meeting last evening in the parlors of the Gilman house, this city, where it has been in session for the past two days. This society is doing good work for the cause of homeopathic medicine in this state.

It admits as members none but regular graduates of reputable schools of medicine and surgery. The name of Harlem B. Drake was added to its list of members at this meeting.

Its newly elected officers are as follows:

President, Dr. George Wigg; first vice president, Dr. B. E. Miller; second vice president, Dr. E. C. Brown; recording secretary, Dr. S. Lewis King; corresponding secretary, Emma J. Welty; treasurer, Dr. Osman Royal; board of

censors: Dr. C. E. Geiger, Dr. B. E. Miller, Dr. Emma J. Welty, Dr. A. S. Nichols, Dr. L. Henderson.

The papers presented and read before this society were as follows:

Annual address, by the president, Dr. George Wigg.

"Prophylaxis of Vaccination," by Dr. L. Henderson.

"Arsenicum," by Dr. A. Brown.

"Hip-joint Disease, Its Etiology, Pathology and Diagnosis," by Dr. C. E. Geiger.

"Purulent Inflammation of the Middle Ear," by Dr. E. C. Brown.

"Ophthalmia Neonatorum," by Dr. Emma J. Welty.

"A Case from Practice," by Dr. Calla B. Charlton.

"Signs and Symptoms of Pregnancy," by Dr. B. E. Miller.

"Parturition," by Dr. Wm. Geiger.

"Sectarianism in Medicine," by Professor Wm. Todd Helmuth, of New York.

A vote of thanks was extended to the proprietors of the Gilman house for their generous hospitality, and the meeting was adjourned till its next annual meeting, on the second Tuesday in May, 1890.

Texas Homeopaths in Council.

The sixth annual session of the Texas Homeopathic Medical Association was held at Fort Worth, June 4th and 5th.

The meeting was called to order by the president, Dr. Frank Hines. After prayer by the Rev. Lowben, an address of welcome extending the hospitalities of the city was delivered by Dr. M. Ellen Kellar.

After roll-call, reading of minutes of previous meetings, etc., the president delivered his annual address, for which the society tendered him a vote of thanks, and referred the address to a committee

to report upon suggestions made therein.

The board of censors reported favorably upon applications for membership from the following:

M. J. Blaine, M. D.,—San Antonio.

M. Ellen Kellar, M. D.,—Fort Worth.

P. Stammer, M. D.,—Waxahatchie.

J. C. Lewis, M. D.,—San Antonio.

H. F. Fisher, M. D.,—Austin.

J. E. Thatcher, M. D.,—Dallas.

The question of legislation was next taken up and after much discussion a committee was appointed to consider the issue and report back to the association as soon as possible. The following is a substantial report of said committee:—That it is necessary for the homeopathic profession of Texas to have proper representation before the state legislature, and that the society should pay the necessary expenses of a committee appointed for that purpose; therefore the president is empowered to levy an assessment of \$5.00 upon each member of the society, payable within ninety days, also that the president can levy a second assessment of the same amount when the first is used up.

The following compose the legislative committee: Drs. G. G. Clifford, San Antonio; Thos. H. Brogg, Austin; Dr. Jos. Jones, San Antonio; Tertius Marks, Sipe Springs; H. F. Fisher, Austin.

Next come the report of the bureaux, and interesting papers were presented by Drs. Joseph Jones, Tertius Marks, M. A. A. Wolff, S. W. Cohen (two papers), H. C. Morrow, H. F. Fisher and G. G. Clifford.

Resolutions of regret of the death of Dr. W. S. Lee were passed.

Election of officers:—Dr. J. R. Pollock, M. D., president; Dr. Tertius Marks, M. D., 1st vice president; H. C. Morrow, M. D., 2nd vice president; G. G. Clifford, M. D., secretary; W. F. Thatcher, M. D., treasurer.

Delegates appointed:—To the Ameri-

can Institute, Drs. G. G. Clifford and S. W. Cohen; the Southern Association, Drs. F. Hines and H. F. Fisher; the International Hahnemann Association, Drs. H. C. Morrow and G. W. Sherbino.

Austin was selected as the next place of meeting.

Kansas Homeopaths.

EMPORIA, KANSAS.

The twenty-first annual meeting of the Homeopathic Medical Society of the state of Kansas, convened in Y. M. C. A. rooms, Emporia, Kansas, May 1st, 1889, and at 2 o'clock p. m. was called to order by vice president, Dr. F. B. Sherburne, of Emporia.

An address of welcome was given by Rev. F. J. Sanerber of the 1st Presbyterian church. It was full of valuable and suitable suggestions, and on motion was recommended to be published with the proceedings of the society.

Dr. S. A. Newhall, the president, being absent, the annual address was read by the secretary. It was received with applause and recommended for publication.

Several new members were received. The attendance was not so large but many valuable papers were presented and freely discussed.

It was decided by motion to send papers to various journals for publication, to such journals as were generally read throughout the state, and a committee was appointed to prepare papers.

Dr. P. Diedrich, of Kansas City, Kansas, was appointed chairman of that committee, with the power to call upon others to assist.

Dr. D. B. Cook, of Clay Center, Kansas, was unanimously chosen president of the society for the ensuing year. Other officers were as follows: Vice president, Dr. J. W. Dill, Benton; recording secretary, Dr. M. Jay Brown, Salina; corre-

sponding secretary, S. G. Van Scoyac, Abilene; treasurer, Dr. P. Diedrich, Kansas City, Kansas; Board of censors, Drs. G. W. Roby, Topeka, J. A. Kirkpatrick, Anthony, and Mrs. F. M. W. Jackson, Emporia, Kansas. On motion Salina was chosen as the place for the next meeting.

The following persons were chosen to represent the society :

Dr. H. W. Roby, American Inst. of Homeopathy, at Lake Minnetonka, Minn., June 24, 1889.

Dr. P. Diedrich, Western Academy of Medicine, at Rock Island, Illinois.

Dr. G. H. Anderson, Nebraska State Society.

M. Jay Brown, State Meeting of Colorado.

The society has lost one honored and faithful member during the year, Dr. A. P. Forster, of Fort Scott, Kansas, who died March 26, 1889, at the age of seventy years and twenty four days.

Appropriate resolutions were passed, and recorded with the minutes of the society.

Hints on Paedology.

To the Honored Members of the Ohio Society :

Having been elected honorary member of your body I feel that I should yearly show my appreciation of the honor. I believe that I cannot do it better than to contribute something from my experience for the general information of the members.

I wish that I could emphasize a fact so that all would feel the force of it. Few realize the great efforts being made to take from Homeopathy the large patronage included in the sneering remarks made against it in the early days. "Homeopathy may do for women and children." The entrance to many a family, as the

older members can tell you, was through the children. "Try him for the children" was often the passive consent of paterfamilias which proved the entering wedge that eventually split the whole family and their friends from Allopathy. The wise ones among the regulars no longer consign us to these young members of the family but are making extra efforts by medicines palatable to hold on to these growing influential members of society. Small sugar-coated pills, sugar pills, compressed tablets etc. increase and multiply. Disks are a sort of compromise that many will like, but nothing is so emphatically homeopathic as any of our pills below No. 30. I believe we should keep up our distinctive form of administering medicine. More than that we should educate the people that it is something more than the form of the medicines. Nothing does so much as a careful analysis of a case and selection of the remedy.

I do not want to charge our profession with a neglect of the children but I want to emphasize the fact that more care should be used in their management. In the early days, our older men will tell you, when called to a child of the family they knew it was "a lone shot." If they failed they were out for good. You can readily imagine what a most careful prescription was made. Do we make as careful, anxious, thoughtful prescriptions today? "He is a good baby, doctor," is a remark that has led to careless prescribing, not to say neglect of children, by the thoughtless members of our profession. Cannot you see that if we neglect children's cases some one will get them. The physician who can not and will not understand children's cases will lose one half of his practice sooner or later. Now is the most auspicious time for some one physician in each city to make children's diseases a specialty. "The family physician" is a strong term and one to be coveted

and worked for. The grateful parent will cling to the physician who saves baby. Babies grow apace and the friendship should continue a binding influence. The physicians of the largest practice and most successful have been the family physicians who loved children.

While writing the foregoing I was consulted by a mother whose case emphasizes some of the points referred to above. Her baby has the following history: It was the seventh. It was not wanted. The maternal instinct was strong and when appealed to prevailed. It was well nourished when born and all seemed well. When I presented my bill for full services rendered I was paid, but with a pout and informed that "our relations would now cease." I had simply done my duty and said "very well" and supposed I would never see the family again. To-day the mother comes (the very first time she is down town), to consult me about baby and to get my advice. (Would I be less than human if I should here remark "blessed be the tie that binds" this family pocketbook to my supposed skill?)

But let us look into this case carefully. It must be helped and that speedily. It cries at night, disturbs paterfamilias, throws up its food and seems out of sorts. She is a brunette of spare build, hence has little milk. Is constipated and has poor appetite, hence gives milk hard to digest. She feeds it some. Shall she wean it? Is fed partly on Nestle's Food which it throws up, but not at night, in curds and seems so sick, vomits soon after eating. Can the mother's milk be improved? We will try by slop-feeding her. She is ordered cocoa shell tea between meals and a drink of water after each time nursing, a liberal diet and plenty of gruels. There are two objects in that: 1st to increase the milk, and 2d to render if possible the alimentary contents more semi-solid. A careful examination re-

veals no uterine displacement to cause mechanical obstruction to the bowels. She is sensible and believes that her milk cannot be good for lack of liquid elements. There is a bilious tendency of body and an irritability of mind that suggests colic, indigestion and Nux. I have found this: adapt the food and medicine for the mother, and you often cure the nursing child.

But this case presents dangers ahead. The mother's milk heretofore has disappeared when the child is six months old. So feed it we must for a drying up of the milk fountain during the hot weather coming will be fatal to the infant. Again, I like a child to be partially fed even when only two months old. I feel that then we have enlarged its pasturage, and usually, like a calf that has extra supply, it grows more vigorously—is over weight and measure. Another hint I have received: I do not try to make one food agree with all children. What food agreed with the other children? "Ridge's," she says, so that food is advised. It is useless to continue the Nestle's food if it is vomited after the gastric catarrh is cured. My diagnosis is made up of three elements. The vomiting, the great appetite and *the white tongue*.

I ought to add that the father is of a nervous temperament, spare, evidently not a good feeder. Things do not run smoothly at home—there being more or less friction. These all affect the child through the mother's milk—making it less rich and sweet.

When I stop to think of it I do not wonder that Pædology is not often chosen as a specialty. There are more factors entering into the problem for solution than in any other specialty that I know of. Look at the influences bearing on a nursing child. Hereditary, antenatal influences, temperament, domestic life, food, hygiene, ventilation, handling, etc., etc. All must be understood. He is a wise

and heroic physician who chooses this specialty. If he has the necessary training and ability he will be skillful, successful. When he comes to measure and weigh the growing infant and is able to manage a child so that it exceeds the standard average the enthusiastic pride of the parents will widen his clientele. I believe that if we had more enthusiastic Pædologists we would have more and better mothers.

Speaking of the average standard of weight and measure I am convinced that it will be changed. In Life Insurance the American table of mortality has supplanted the European. So medical directors have come to raise the standard of average weight to height. I should like to get the monthly weight and measure of children all over this country from birth to maturity. I believe the facts would interest us greatly. I hope to have a chapter on this subject in the new edition of my work on Diseases of Children, now in preparation.

Respectfully submitted,

DR. T. C. DUNCAN.

Specific Medicines.

Paper read before the Texas Homeopathic Association, at the Convention in Fort Worth, Texas, June 4th and 5th, 1889,

BY

M. A. A. WOLFF, M. D.

An inheritance from the time of medical empiricism is the hunting for *Specifica*, either for a single sickness or for all the ills of the body and mind. "A specific," says the dictionary, "is an applicable remedy or a remedy claimed to be infallible." In every day life the second, false and erroneous definition is correct. One of the oldest "*specifica*," an all-cure, was renowned even hundred of years before the Christian era. It went by the name "*Theriac*," and was composed of

opium, as a base, mixed with verdigris, saffron and several aromatic substances as vehicle. No wonder that in those times its soothing, pain-alleviating effects caused it to become celebrated and considered a fit and acceptable gift to kings and potentates, precious as the costliest jewels. It certainly was "a remedy *claimed* to be infallible;" but we, knowing the compound, can only call it a palliative, for "a specific" is nothing *less* than the unqualified definition states, "an infallible remedy." In the fifteenth century we find progress made toward this understanding, for who can deny it "*Specificum laxativum paracelsi*," which is simply sulphate of soda—is a single substance with one single (*paracelsi*) aim, and given in sufficient quantity, according to circumstances, it will purge. But would you call this salt a specific in the real sense of the word, "an infallible remedy," implying, "to cure?" I think not, for as *Theriac* it is only a palliative. In many cases it is given, from ignorance or superstition, as a "cure-all by purging," while in reality it fails to cure and even complicates the malady, increases suffering and protracts the cure. We are now but ten years from the twentieth century. Oh, how we have retrograded toward the earliest period of the world! Such is the claimed progress in our days of enlightenment of which so-called "regular" medicine boasts that if we Homeopaths did not have a never-setting leading star to guide us we should have to mourn the relapse; for who in our midst does not even from day to day, receive pamphlets and samples of new discovered "*specifica*," often with the formula which proves them to be poly-pharmaceutical compounds which among a class of so-called physicians becomes the fashion for a time until they, if honest, must relinquish them because they are not, as claimed, *specifica*. A specific, as a medical expression, I maintain, to be a remedy

not only which claims infallibility, but which is infallible, implying by this expression that it cures. Now then, do there exist *specifica*? Yes, gentlemen, and there have been such from the day Samuel Hahnemann taught us how to find them. All homeopathic medicines are *specifica*, not for colic, for scarlatina, for typhoid and so forth, but the complication of symptoms we are called to attend; and they are not ephemeral, fashionable *specifica*, but will remain *specifica* as long as rain and sunshine alternate to fertilize the soil. And the beauty of it is that a very mite of the *specificum*, a single simple drug, is enough to cure the most formidable ailment, if our diagnosis is correct. But what do I mean by diagnosis? Neither pneumonia, measles nor any other pathologically tabulated name of malady, but on one hand, the symptoms the patient is able to give, in connection with what our eyes, our ears, our hands are enabled to discover, the diagnosis of the disease, and on the other hand the pathogenesis of a drug which causes similar symptoms, the drug diagnosis. This drug when found is the specific for that case, while in another similar case, the diagnosis of the case might have one or a few prominent and different symptoms, which compel us to find quite a different specific. As an illustration of what I mean I shall as briefly as possible, mention three cases of *one* character, I had to treat in the course of the last seven years, but each by different drugs. About seven years ago in San Francisco, I was called to see a woman, pregnant in about the seventh month. After a hard chill she was now lying as dead, icy cold and without consciousness. Ver. alb. 30 soon brought her around. In the course of fourteen days the spell came twice more and was successfully overcome by the same means. Diagnosis, (old style), the child she bears is dead. She was attended

by another physician at full term and his statement verified mine. About two years later I was called to a lady from the country visiting a friendly family in San Francisco. They were in the greatest consternation for they thought she was going to die. Prescribing for what I saw she was all right in about a half an hour, and able to converse with me and give her statement. I had all reason to conclude that she must be in delicate circumstances but the foetus be dead. Next morning she came to my office, received medicine to get over the spell if it should reappear and it was decided that as soon as she had made the necessary arrangements for an absence from her household she should return and remain in San Francisco until cured. Three days after, she came direct from the railroad, had to lie down at once, overtaken by the deadly sensation, received medicine according to circumstances, was able to return by next train, taking along medicines and directions, as it was considered safer in the family circle than amongst strangers, even as friendly. If necessary they were to telegraph. This was on Monday. The following Sunday I went the twenty miles to see her. She had got along so far without another spell. Some time after I received a report that she had discharged a bad smelling decaying lump. She was cured and in about ten or eleven months later gave birth to a fine boy. On April 20th, this year, I was called to come in a hurry to Mrs.—, “she is dying.” I found the lady to all appearances in exactly the condition as the two previously mentioned parties. After about half an hour she was able to converse. She had weaned her fifteen months old baby about three weeks ago, had not yet seen any menstrua and thought she might be pregnant. I found her womb down, cervix almost touching the labia; the labia oris uteri had the velvet feeling of incipient

pregnancy, but nothing sure could be decided. She felt comfortable. I was recalled after a few hours, found her retching and at last vomiting mucous and bile. It gave her relief and she stated that a few days ago she had jumped a low fence to visit a neighbor and had fallen and hurt herself. I need not state my prescription, you would have done what I did. Next day was comfortable, but the following day between 11 and 12, a. m., I was called and found her again prostrated; the chilliness (not shivering) had commenced in the feet which were very cold, but now she only felt an internal deadly coldness.

At last vomiting, as on the previous day, relieved her and medicine was prescribed. All went well again until two days later. Then she had a heavy bleeding of the nose in the morning; I found her about 11, a. m., yawning incessantly, then came the chilliness, and this time vomiting immense dark blood-coagula. She complained of having *a taste of blood all the time*. As this symptom remained steadily during the next day and the one following, when the chill-spell returned, but without nose bleeding or bloody vomit, I took this symptom as a departure for diagnosing the remedy. Ferrum, ipecac, lil. tigr., silicea and zincum. have it, ipicacuanha a few of the other symptoms, but *lilium tigrinum* was overwhelming. Prescription: lil. tigr. 200., a few No. 10 globules, every 6 to 8 hours. She was cured, no return of the chill, the womb was returned to its normal position; she had a discharge of a fetid, decaying lump, described to me as of the size of a big walnut; she is up, around and ready for a vacation into the country. Thus I say lil. tigr. was the specific and will cure any case of the kind. Permit me before I wind up to mention a specific, which I expect you all know, but I bring it forth in honor of high-potency. Whoever has not tried it is obliged to do it, if he will

act dutifully. For almost fifteen years I have used it in hundreds of cases for old and young, for men and women, for children and infants; without failure. In the last three weeks I have again verified its specificity in five cases, two children under three years, one woman and two men of diametrically opposed pursuits. The "registered" name of the malady is dysentery, the pet name amongst laymen bloody flux. The leading indications: tenesmus, small stool, blood and jelly,—mucus does not exactly express what "jelly" does to my mind. Prescription, mer. subl. corros. 200 in No. 10 pellets, every two hours, if repetition is needed. I always give six powders; I only remember two cases in about fifteen years when more than one powder had been taken, in all the rest one powder cured. Therefore I call it a specific. I follow up the prescription with a dose Nux. vom., 200 at bedtime. And now in conclusion permit me to suggest that hereafter when we explain what Homeopathy is, we must especially point out that this is the glory of Homeopathy and of Homeopathy only, that its medicines, judiciously prescribed, are and will be as long as the world stands the only real specifics.

Hering's Guiding Symptoms.

Published by the Estate of Constantine Hering, Philadelphia.

Many homeopathic physicians do not know what kind of a work this is. To any and all such, we will state that it is a *Materia Medica* and one of the most complete that has ever been offered the profession. One great point in its favor is that every symptom which has been admitted to its pages, had the approval of Dr. Hering and his opinion of its importance in prescribing. Nearly every symptom here given has been verified one or more times, and hundreds have been repeatedly confirmed. The relative importance of the symptoms under each

remedy—we do not say drug because drug is too crude; we hope no homeopath prescribes *drugs*—is designated by appropriate symbols.

These symbols correspond to the four degrees of Boenninghausen. Those physicians who are always prating about "chaff," and about "weeding out the chaff," will here find it weeded out by one of the greatest homeopathic analysts of the age. If by weeding out they mean to include in the *Materia Medica* only such symptoms as come within the narrow range of their perverted vision, then they will have to seek in the pages of Bartholow, Ringer, Scudder, *et id omne genus* for the unction of their souls. At the close of the proving of each remedy we find an analysis of its collateral relationship to other remedies. Thus we might say each remedy has a repertory *in miniature* of its own. This affords the means for comparative study of the *Materia Medica* and when worked out in detail gives us a knowledge of its contents which we can gain in no other way.

Many symptoms of great importance are found even under the old remedies which were added by Dr. Hering from his own experience and observation. Several of these volumes were published before the death of Dr. Hering, and the manuscript of the remaining volume is in able hands. The work contains the provings of many remedies which are accessible in no other form. Among these may be mentioned—*Anthracinum*, *Calcarea fluor*, *Ferrum phos*, *Grindelia robusta*, *Hekla lava*, *Glanderine*, *Kali mur*, *Kali phos*, *Lac caninum*, *Lac vac defloratum*, *Magnesia phos* and *Medorrhinum*. It is to be regretted that the provings of the spring waters are ruled out, for these furnish some of our most valuable healing agents. It is to be hoped that the provings of *Sanicula* and *Wiesbaden* at least will be admitted to the volumes yet to be issued.

The provings of the nosodes are the most complete yet published and throwing all the rest aside, the provings of *Anthracinum Hippozænine* (*Glanderine*), *Lac caninum*, *Lac vac defloratum*, *Lyssin* (*Hydrophobinum*) and *Medorrhinum* so far published, and of *Psorinum*, *Syphilinum* and *Variolinum* yet to come, are alone worth more than the price of the work.

The books are well bound, the paper is excellent, and the type clear and distinct. The work when completed will contain ten volumes, seven of which have been issued.

To the homeopaths of Texas, of the south and of the world, you can not afford to be without the *Guiding Symptoms*. Many homeopaths content themselves with one or more of the condensed *Materia Medicas*. These are valuable for quick and ready reference, and for portability, thus enabling us to study our cases at the bedside. But when we want to study a remedy in its entirety and get at the finer shades of the proving, we need such a work as the *Guiding Symptoms*. No man would want to live with a skeleton wife, even if animated, no homeopath should be content to practice with a skeleton *Materia Medica*.

With the *Organon* to show us how to examine the patient, to explain the dose and the repetition thereof, with two or more good repertories and with some complete *Materia Medica*, like the *Guiding Symptoms* to affiliate the most similar remedy to our case, there will be no need to steal the livery of the Allopath to serve our patients in. H. C. M.

The Minneapolis Hospital elected a new Board of Directors May 21st. The by-laws were changed so as to increase the membership of the Board from nine to fifteen and to make it necessary that all should be ladies.

California State Society.

The thirteenth annual meeting of the California State Homeopathic Medical Society convened at the Hahnemann Hospital College, San Francisco, May 8th, 1889, at 8 o'clock p. m.

There were thirty-seven members and a number of visitors present.

The president, Dr. S. P. Burdick, called the meeting to order at 8:30.

After the minutes of the previous meeting were read, the board of censors reported favorably upon the names of Drs. Henry Damkroeger and Alice Burritt, and they were elected to membership.

The treasurer reported a balance on hand of \$360.30, and the secretary of the board of examiners, that during the past year fifty-nine licenses were granted and one refused on account of insufficient credentials, also a cash balance on hand of \$240.20.

On motion of Dr. French, Dr. W. A. Phillips, of Cleveland, Ohio, was elected an honorary member.

The president then delivered his annual address, in which a strong plea for a higher standard of medical education was advanced and a scheme by which such an end could be obtained was set forth.

A vote of thanks was tendered the president for the able and edifying address, after which the society discussed the question of a banquet and finally decided that the subject be indefinitely postponed.

THURSDAY, MAY 10th.

The second session of the society convened at 10:15 a. m. The president in the chair.

Nominations and election of officers being in order, the following physicians were elected for the ensuing year:

President—Dr. H. L. Bradley, of Fairfield.

1st Vice-president—Dr. C. L. Tisdale, of San Francisco.

2d Vice-president—Dr. G. H. Martin, of San Francisco.

Secretary—Dr. A. C. Peterson.

Treasurer—Dr. W. A. Dewey.

Board of Censors—Drs. Albertson, Boericke, S. Lilienthal, Jenks, Ledyard.

Board of Directors—Drs. Palmer, chairman; J. T. Martin, Worth, Townsend, L. H. Bradley.

Board of Examiners—Drs. E. W. Bradley, G. H. Jenks, G. H. Martin, Sidney Worth, R. H. Curtis, G. E. Davis and A. C. Peterson.

Alternates—Drs. C. G. Merrill and J. W. Ward.

Under the head of clinical medicine Dr. Moliere read a paper entitled "Electricity in relation to Clinical Medicine."

Dr. C. L. Tisdale read a paper entitled "Hemorrhoids."

Dr. Simpson inquired about advisability of operation on a large, painful, external pile in a pregnant woman near term.

Dr. Tisdale would not operate in such a case.

Dr. G. H. Martin then read a paper entitled "Electrical Phenomena in various forms of Paralysis and their significance."

The secretary read a paper from Dr. C. V. C. Scott, in which was related a case of severe itching and burning of the feet and toes, which was cured with urtica dioica.

In the afternoon session Dr. Selfridge reported some cases of pneumonia from his case book.

Dr. Simpson inquired when, in an apparently favorable convalescence, a sudden hepatisation sets in, whether in such instances there may be clearing up later.

Dr. Selfridge replied that in such cases there was a tubercular diathesis and that consumption generally ensues.

Dr. Burdick said that he had cleared up a case of hepatitis with argent. nit. 200.

Dr. Ledyard read a paper entitled "Pure Homeopathy Illustrated."

Under the head of Ophthalmology and Otology Dr. French read a paper entitled "The Progress of Ophthalmology," and Dr. Simpson a paper entitled "Local applications in Diseases of the Eye."

Dr. W. A. Phillips addressed the society and alluded especially to Dr. Simpson's paper and pointed out how dangerous a factor a little knowledge of the eye could be to a general physician.

Dr. Burdick mentioned his use of the Nitrate of Copper in syphilitic eye troubles.

Dr. Peterson spoke of the uses of Nitrate of Mercury in ulcer serpens and operations in mastoid disease with Cocaine subcutaneously injected as an anaesthetic.

Under the head of Obstetrics, Dr. H. Bradley read a record of cases summarized as "Embarrassing Situations in Labor." A history of convulsions, delayed labor and irregular contractions of uterus.

Dr. Burdick mentioned unusual cases of labor, one that delayed for three weeks after the os dilated, another where pains came on every night, and ceased at daylight.

The doctor also stated that the Puerperal Convulsions were due to hydraemic condition of the blood, therefore the patient should be quieted with an anaesthetic, as every effort of contraction forces the hydrated blood into the brain and we have serous apoplexy.

The unborn child also is apt to be killed by the second or third convulsion.

At the evening session the subject of Obstetrics was continued.

Dr. Burdick stated that he operates immediately in cases of lacerated perinæum and uses iron-dyed silk and not wire.

Dr. Dewey spoke of the use of serra-

fins, an apparatus used in Vienna to preserve coaptation of the cut edges.

Dr. E. W. Bradley usually waits till third day after delivery, obtaining best results in delaying operating till that time.

Dr. L. H. Bradley read a paper entitled "Hydatiform Mole."

Under Bureau of Surgery, Dr. E. W. Bradley related injuries received by the explosion of gasoline and the numerous operations to repair the damage completely.

Dr. Burdick cited a case of trauma that resulted in abscess, involving the entire hand, with sloughing out of the flexor tendons. Secondary hemorrhage occurred several times but the hand was saved. Starch and hamamelis dressing was employed.

Dr. Albertson related a case of a lawyer who dislocated his arm by a full, round sneeze.

Under Clinical Medicine there were several papers, relating to the proving of drugs and verified symptoms, presented by Dr. Samuel Lilienthal.

Under unfinished business it was resolved to have a committee of three chosen to work to prevent adverse and mischievous legislation, agitated by the so-called "regular school."

At the next annual meeting it was agreed to employ a stenographer to take down the proceedings in full, and the entire matter to be published; also that the meeting continue two full days, commencing Wednesday, at 10:00 a. m., instead of 8:00 p. m.

Drs. Boericke, Albertson and Dewey were appointed delegates to the American Institute of Homeopathy, and Drs. G. E. Davis, Moliere and French, to the Inter-collegiate Association.

The incoming President, D. H. L. Bradley, was conducted to the chair, who greeted the Society in a few well-chosen words. A vote of thanks of the Society

was tendered to the retiring President and the Society adjourned.

A. C. PETERSON, M. D.,
Secretary.

BOARD OF EXAMINERS.

The board of examiners elected at the Annual meeting of the State Society just closed organized on Tuesday, May 14th, at the office of Dr. Davis. Dr. G. E. Davis was chosen President and Dr. A. C. Peterson, Secretary. It was decided to hold regular meetings on the first Tuesday of each month. The full board is composed, viz : Drs. E. W. Bradley, G. H. Jenks, G. H. Martin, Sidney Worth, R. H. Curtis, G. E. Davis, A. C. Peterson. Alternates, Drs. C. G. Merrill and J. W. Ward.

A. C. PETERSON, M. D.,
Secretary.

Vaccination.

BY JOSEPH JONES, M. D.

That syphilis is diffused by vaccine lymph, observing, unprejudiced physicians will not, in the face of facts derived from personal observation and experience, added to the great amount of testimony of the ablest physicians and surgeons of Europe and our own country, undertake to deny. When we see such names as W. B. Collins, M. Depond, Ballard, Heim, C. T. Pierce, Bakewell, Robert Alexander, Gunn, J. R. Newton, Niemeyer, Sir Thomas Watson, Constantine Hering, Charles Creighton, M. Ricord, and many others high as authority on the important subject, recorded on the side of syphilitic infection through vaccination, we should consider well what is our duty before we expose the innocent children entrusted to us, to the dangers of vaccinal syphilis.

Dr. Vienosis, in a thesis presented to the faculty of medicine in Paris, in the year 1860, and also in the Archives of

Medicine for the same year, declared that his investigations led him to the belief that, "if the lymph from a vaccine vesicle be alone inoculated, the cow-pox alone will be produced, but if in addition to this the blood of a person affected with constitutional syphilis be inoculated at the same time, then syphilis may also be communicated. The cow-pox appearing first, having a shorter period of incubation, and after a time the syphilitic tubercle makes its appearance on the inoculated part, and in due course is followed by secondary symptoms." Many physicians have verified the truths presented by Dr. Vienosis' investigations. The mistake must not be made that syphilitic inoculation results only from, arm to arm vaccination. The origin of the virus in the general market being human small-pox virus transferred to the cow, the vaccinated are equally liable to syphilitic inoculation from the use of the so-called cow-pox virus, the system of the cow not eradicating the syphilitic element. It would seem that no observing, reasoning physician could, in the face of all the facts and testimony of the highest authorities, doubt that vaccinal syphilis is a demonstrated fact. Cases innumerable can be presented to verify this great truth. Dr. Holmes published in Vol. 1 of his Surgery the remarkable results of two vaccinations by M. Trausseau. Space will be given to but one, which is presented as a sad tragedy enacted at Rivalta, Piedmont. "Here a child named Chia-brera was vaccinated, from him another child named Mazone was vaccinated; with forty-five other children, syphilis was conveyed from the first to thirty-nine children; from the second to seven children. The two children were very ill and one died three months after vaccination. One communicated the disease to his mother and the other to his wet nurse. Twenty mothers or nurses were similarly affected.

In three cases the disease was communicated from the mothers to their husbands."

In my own practice, some years since, petitions were received from five families urging me to vaccinate the members of each from the arm of a very beautiful and apparently healthy baby of six months. Its parents appeared to be in good health, were prominent in society and generally very popular, as the father was under my treatment at the time for syphilis in an advanced stage, a refusal was the answer to my petitioners. Two of the families employed another physician who vaccinated with this virus, direct from the arm; one of the vaccinated was a child of five and a half months old, and of apparently healthy parents. The sores at point of vaccination were not healed at the end of three months; were deep, had indurated borders and a syphilitic roseola appeared on the body. This eruption increased until the surface of the body was literally covered with it. The glands in the arm pit corresponding with the arm vaccinated, became inflamed and indurated. Soon afterward those of the opposite side and the inguinal glands became similarly affected, he had the specific sore throat and was nearly four years old before he had any teeth which decayed almost as they made their appearance. He is now in school but does not get along well, has a very delicate constitution and is subject to frequent attacks of inflammation of his throat. The glands have remained large and indurated. His mother, not nursing him, escaped inoculation. His father never forgave me for not telling him that the virus was contaminated with syphilis, and before his child recovered committed suicide.

The other child vaccinated with this virus had the same kind of ulcers at point of puncture, like eruption on the body and inflamed and indurated glands, but all the symptoms were milder and the

constitution not so undermined by the disease; teething was delayed, the child suffered a great deal from diarrhoea, and at fifteen months of age died of hydrocephalus. The mother had a syphilitic ulcer appear at the base of one of her nipples, inflammation of the glands in the armpit of the corresponding side. The characteristic eruption did not make its appearance, doubtless owing to the weaning of the child and constitutional treatment. The parents of the child from whose arm the two latter were vaccinated informed me that it had a sore arm for three months, and an eruption on its body, not seen by myself however, in consequence of absence of the family from the city.

In the spring of 1864, while the third Division of the fourth army corps was in camp at Reynolds Station, Tenn., a company of the 86th Indiana Volunteers was ordered out on some sort of special duty. While on such duty, believing they were exposed to small-pox, seventeen members of the company were re-vaccinated by the assistant surgeon accompanying them. Some time after their return to camp, fourteen of the number vaccinated reported to me, then surgeon of the regiment, for treatment of the sore at point of insertion of the virus, believing they had a splendid taking, but the sores were not healing. Examination disclosed the fact that each had a well defined chancre at point of vaccination, the axillary glands of corresponding side became inflamed and indurated, in some of the cases they suppurated. The inguinal glands were also involved, and on the body, arms and face a syphilitic roseola appeared, the nature of which no one could doubt. One of the number lost his arm by amputation.

At the present time a gentleman is under my treatment, who was vaccinated when a lad, the sore did not heal as a cow-pox sore, but the arm became high-

ly inflamed and the sore assumed the character of an ulcer. Axillary bubo formed and suppurated. The characteristic secondary eruption appeared on the arm, face and body, thence the eyes became inflamed, iritis was established, which resulted in the loss of vision of the left eye.

He is now suffering from syphilitic muscular atrophy. This gentleman married and became the father of four children; the first was a decided syphilitic and died while teething, of hydrocephalus. The two next were twins, likewise syphilitic. There was but one week between their deaths, which occurred at the age of about four months. They died of meningitis, evidently syphilitic. The fourth, a daughter of seven years of age, small in stature and delicate, has the appearance of one affected by hereditary syphilis. My knowledge of the early history of this family was obtained from the physician who treated from time to time the father, from the date of his vaccination until after his marriage.

The above represents but a few cases similar to many which have come under my observation and treatment.

(To be continued.)

The late Dr. J. Milner, Fothergill said that in feeding the acutely ill, it is useless and worse than useless to give starchy foods. The insoluble starch must be first changed into soluble dextrine and maltose, as is done in Mellin's Food. This food, because the farinaceous has undergone the same conversion as by the action of the body ferments, is independent of the digestive act and when swallowed, at once finds its way into the blood current to sustain the waning powers. Mellin's Food, consisting as it does so largely of soluble carbohydrates, is a typical "true food" for the acutely sick.

Book Review.

DIPHTHERIA; ITS NATURE AND TREATMENT.
By C. E. Billington, M. D., and Intubation in Croup and other Acute and Chronic Forms of Stenosis of the Larynx. By Joseph O'Dwyer, M. D.

These writings consist mainly of statements from clinical observation and experience of the authors. The subjects are handled intelligently, and are presented to the profession in a clear and succinct manner.

The contents are as follows: Definition and History, Etiology, Pathology, Symptoms, the Primary Natures of Diphtheria, Secondary Diphtheria, Diphtheritic Paralysis, Diagnosis, Prognosis, Prophylaxis Treatment and Intubation. Mess. Wm. Wood & Co., 56 and 58 Lafayette Place, New York, are the Publishers.

LECTURES ON BRIGHT'S DISEASE. By Robert Saundby, M. D., Edinburgh. Fellow of the Royal College of Physicians, London; Emeritus Senior President of the Royal Medical Society, Member of the Pathological Society, London, etc., etc.

This work is the result of thirteen years of hard and patient study of that dread disease which takes its name from Dr. Bright.

Professor Saundby's advantages from a clinical standpoint, and his close application are sufficient to recommend the treatise. The work however speaks for itself.

This is the sixteenth volume of "Treat's Medical Classics," and contains fifty illustrations. Price \$2.25. Address E. B. Treat, Publisher, 5 Cooper Union, New York.

DIED:—We are pained to notice the death of Dr. George F. Foote, founder of the insane asylum at Middletown, N. Y. The doctor was a senior in the American Institute.

General and Personal Items.

Dr. A. G. Lewis, formerly of Corsicana, Texas, is now located at No. 1706 Frederick Avenue, St. Joseph, Mo.

Homeopathy is to have a representative organ in the West. Dr. D. A. Foote, of Omaha, will edit the new journal.

To our subscribers: This is the dull season and you can all find time to go to the postoffice and get a \$2.00 money order and mail to our address.

Drs. E. Z. Cole and C. S. Fahnestock, of Indiana, C. N. Hart, of Denver, Col., and S. D. Pollock, of Galesburg, Ill., have gone to Europe to recuperate.

Dr. Nixon, a former partner of the distinguished Dr. Walker, of St. Louis, is a recent applicant for professional advancement at that place.

The old school physicians of Ionia, Michigan, are furious because the new board of pension examiners is Homeopathic.

It is stated that probably not over one-third of the practicing old school physicians of Arkansas are graduates.

It is said that premature baldness increases in exact ratio with the amount of soap and foreign substances applied to the hair and scalp.

A man in Pittsburgh recently rang the bell at the house of an allopathic physician at about one o'clock, a. m., and when the worthy doctor appeared at the door, the stranger said he simply wanted to enquire where he could find a homeopathic physician.

Dr. Charles S. Mack has removed from Boston to 57th street and Lake Avenue, Hyde Park, Illinois.

Journalistic Frankness: Editor Pinney, of the Winstead (Conn.) Press, retires from journalism without any nonsense. In his "valedictory" he says: "From the customary leavetakings of the public,

with hypocritical laudation and cheap thanks for "generous patronage," I must be excused. I thank the public for nothing. It has had ample return for all that it has done for me, and I give it a quit claim for all that I have done for it.

Dr. George H. Shelton, a genial young homeopath of New York, recently received a handsome honorarium from Mr. Pflagger, owner of the Ponce de Leon Hotel, St. Augustine, Florida, and a heavy owner of Western Union Telegraph stock, in the shape of a certificate for \$50,000 worth of Western Union, worth on the market about \$85,000. Dr. Shelton having been physician to Mrs. Benedict, the donor's daughter, to whom he was unusually kind and attentive during her last illness. This is said to be the largest honorarium ever paid a physician in the United States.

The Iowa City Board of Health has prohibited the sale of Limburger cheese, on the ground that it is dangerous to the public health.

A bill appointing a separate Board of Homeopathic Medical Examiners at Large, passed the Florida state senate, May 21st.

It is considered very impolite to pretend to be warming your hands by holding them over the head of a red-headed girl.

A gentleman in this city had a member of his family nervous and sick, and to save intrusion from the neighbors put up a sign on his front door: "There is sickness in this house." A German on the opposite side of the street had his wife die, and taking the cue from his neighbor opposite, posted on his front door: "There is deadness in here."—Oswego, (N. Y.) Times.

The latter would be a very good sign for a business that does not advertise in the newspapers.

Kentucky Society.

Through some delay full reports have not been received of the Kentucky Society meeting. At this writing we can only give the names of the newly elected officers, and state that the meeting in its entirety was a grand success. The following gentlemen are sponsors for the status of the association for one year to come :

President, A. L. Monroe, M. D. ; Vice President, J. A. Vansout, M. D. ; Secretary, E. B. Johns, M. D. ; Treasurer, M. Dills, M. D.

Board of Censors.—Drs. Lucy, Edgar and Buck. A glance at these names is sufficient to convince any one acquainted with the personnel of our school, that those of the state of "fast horses," etc., have entrusted the reigns of government of their profession to tried and efficient hands.

With Louisville's only Monroe at the helm and Johns as secretary you will flourish. You have done well. Congratulations.

The writings of the late Dr. J. Milner Fothergill contain many passages which are true aphorisms. No truth could be more tersely and forcibly said than that in the passage from his "Manual of Dietetics": "A suspicion that there is a difference between merely getting food down into the stomach and its digestion, is abroad ; and that a tablespoonful of milk and Mellin's Food which is digested, is really better for the patient than a beef steak which simply passes through the alimentary canal. To supply to the much-tried organism that which it really requires is to give the most efficient help to it."

Mr. G. W. Wigner, who is President of the Society of Public Analysts, London, has made a critical examination of Mellin's Food, and finds that it not only contains the nitrogenous and phosphatic matters essential for the healthy growth of a child, but that these are in the proper proportions. The examination demonstrated that Mellin's Food is not only readily digestible itself, but that it actually assists to digest milk and other foods with which it is mixed. Mr. Wigner considers it of great value for infants and as an addition to the diet of healthy children.

ST. LOUIS, MO.

Messrs. Reed & Carnrick.

GENTLEMEN: I have been much interested in the study of the milk question as it affects infants who are deprived of their mother's breast, and have discussed it editorially and otherwise. This summer I have had the question forced upon me practically, as the result of the illness of my wife, necessitating the weaning of our baby and supplying her with some artificial substitute. I have thus given a practical test of Carnrick's Soluble Food and have been perfectly satisfied with the result, as our little one has thriven on that food, I think as perfectly as if the mother had been able to nurse her. Though this has been her "second summer," she has not had any disturbance of digestion or tendency to diarrhoea at all.

DR. E. M. NELSON.

DALLAS, TEX., June 5, 1888.

Messrs. Reed & Carnrick.

GENTLEMEN: It gives me pleasure to say that I regard your Food Preparations *far superior* to all others. I can point to many little ones whose lives, I feel confident, were saved by them. I have been practicing medicine in Texas for twenty-two years, have tried many other preparations, but after all I hold to yours as the old reliable ; they have never disappointed me. My motive in making this statement is that others may be induced to give them a fair trial.

Yours truly,
J. L. CUNNINGHAM, M. D.

EVERYBODY should plan to have a pleasant conversation at the table just as they plan for good food. A little story-telling, a little reading, it may be of humorous things, anecdotes, will often stimulate the joyous element of the mind and cause it to act vigorously. Try and avoid going to the table tired out. Let all troublesome topics be avoided. Don't scold domestics. Don't discipline children. Think and say something pleasant. Cultivate mirth and laugh if anything witty is said. If possible, never eat alone. Invite a friend of whom you are fond and try and have a good time. Friendship and friendly intercourse at the table whet the appetite and promote the flow of animal spirits.—*Visitor.*

ADVERTISEMENTS.

THE BEST ANTISEPTIC FOR BOTH INTERNAL AND EXTERNAL USE.

ANTISEPTIC,
PROPHYLACTIC,
DEODORANT

LISTERINE

NON-TOXIC,
NON-IRRITANT,
NON-ESCHAROTIC.

FORMULA—Listerine is the essential antiseptic constituent of Thyme, Eucalyptus, Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boric Acid.

DOSE—Internally: One teaspoonful three or more times a day (as indicated) either full strength, or diluted, as necessary for varied conditions.

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially adapted to internal use, and to make and maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, irrigation, atomization, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE—INDIVIDUAL PROPHYLAXIS.

Diseases of the Uric Acid Diathesis.

LAMBERT'S LITHIATED HYDRANGEA KIDNEY ALTERNATIVE—ANTI-LITHIC.

FORMULA—Each fluid drachm of "Lithiated Hydrangea" represents thirty grains of FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.

DOSE—One or two teaspoonfuls four times a day (preferably between meals).

Urinary Calculus, Gout, Rheumatism, Bright's Disease, Diabetes, Cystitis, Hematuria Albuminuria, and Vesical Irritations generally.

We have much valuable literature upon { **GENERAL ANTISEPTIC TREATMENT, LITHEMIA, DIABETES, CYSTITIS, ETC.** } To forward to Physicians upon request.

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GASTRIC DERANGEMENTS.

HORSFORD'S ACID PHOSPHATE.

Unlike all other forms of phosphorus in combination, such as dilute phosphoric acid, glacial phosphoric acid, neutral phosphate of lime, hypophosphites, etc., the phosphates in this product are in solution, and readily assimilative by the system, and it not only causes no trouble with the digestive organs, but promotes in a marked degree their healthful action.

In certain forms of dyspepsia it acts as a specific.

Dr. H. R. MERVILLE, Milwaukee, Wis., says: "I regard it as valuable in the treatment of gastric derangements affecting digestion."

Send for descriptive circular. Physicians who wish to test it will be furnished a bottle on application, without expense, except express charges.

Prepared under the direction of Prof. E. N. HORSFORD, by the

Rumford Chemical Works, Providence, R. I.

CAUTION:—Be sure the word "Horsford's" is printed on the label. All others are spurious. Never sold in bulk.

BEWARE OF SUBSTITUTES AND IMITATIONS.

Southern Journal of Homeopathy

NEW SERIES
NO. 6.

San Antonio, Texas, July, 1889.

OLD SERIES
NO. 68.

• • Editorial • •

News and Comment.

AN eastern medical journal, which wages unsparing warfare on everything calling itself Homeopathic, and whose friends insist upon placing it in a strangely inconsistent attitude by having it "recognized" by the American Institute of *Homeopathy*, has been propounding queries to the learned Judge Barrett, asking if a man calling himself "*an* Homeopathic physician" has a right to use anything but strict Homeopathic preparations. The able Chancellor, evidently suspicious of a party calling himself "*an* Homeopathic physician," proceeds to lay down the law as it appears to him, and which, we must add, appears very ridiculous to us. The term "*Physician*" is a very broad one, and is hardly capable of exact definition. We understand a physician to be one who possesses a knowledge of Anatomy, Physiology, Pathology, Hygiene, Obstetrics and Therapeutics, besides an acquaintance with all the collateral branches of medical science. It is not necessary that he administer *Mercury*, or *Quinine*, or *Aconite*, or *Bryonia*, or in fact, any *drug* at all, in a given case, to entitle him to the name of physician. He may exercise his function as a Hygienist, or as a

Surgeon, or as a Pathologist, in all cases as a *Physician*, and all the while be doing the best that can be done for the relief of his patient. How pitiable, if not contemptible, is the belief that the physician's sphere is bounded by the narrow limit of pills and powders! There is, however, about the limits which Judge Barrett's opinion would assign him. We advocate Homeopathy—the single remedy, the *similimum*, and the minimum dose—not because we believe the system to be perfect, but for the reason that it achieves results in the sick-room known to no other medical practice. We are employed by our patrons, presumably, because it is known that, whatever our accomplishments in other departments, we are, in the main, guided by the law of similars in our therapeutic administration; and, moreover, because our patrons believe that, no matter what its shortcomings are, the substantial results of Homeopathy are very greatly superior to the results of "*Allopathy*" and "*Electicism*," whatever those terms may mean. In short, there can be no legal distinctions between the "*schools*" in the sick-room, and Judge Barrett would have been wise in saying so.

* * *

WE would like to inquire of some of our Allopathic contemporaries, how is the question of the virtue or the viciousness of a system of medicine to be de-

terminated? We are asking this question seriously, and we want a respectful response.

Would *Investigation* be a proper method of ascertaining the merits of, say, Homeopathy? Suppose an epidemic of dysentery should appear in the interior of Texas; that a class of physicians calling themselves "Homeopathic" should cure ninety-five per cent. that another set of prescribers denominating themselves "Allopathic" should cure only sixty-nine per cent.—would such an occurrence be worth anything in estimating the relative value of the contending schools? We believe it would, and we are sure the people of Texas, like the people of other states, will not be deceived much longer when they come to choose their physicians.

* * *

A HOMEOPATHIC editor has written up what we should call "The ridiculous farce of Allopathic Medical Education." Now let some old school editor hold up the mirror before our school. We fancy that no matter what men see through opera glasses, they are mighty sure to see something interesting when standing before a looking-glass.

* * *

IS PARTYISM consistent with progress? Of course it is, and, as a matter of fact, very little progress has ever come from anything save partisanship of the right sort. Let us explain: A party is an instrument, a tool, not a master; it is incapable of directing itself, because it is inanimate; therefore a party is to be judged by the character of its adherents. *A party does not possess life or limb!* It cannot be good or bad of itself. "Party wickedness" is really not the crime of some poor, inanimate creature which some men seem to suppose to be possessed of inherent righteousness, but is entirely attributable to the shortcomings

of humanity. Now, it seems to us that the place for a protectionist is in the Republican party, because that party is pledged to the perpetuation of protection. If the Republican party reverse its policy or if it take ground no longer consistent with his convictions on the question, then does it become his duty, due his sense of manhood, to leave that party and gain some organization pledged to carry out his principles. If, however, he does not withdraw from the party when it ceases to represent his convictions; if he continue to support its candidates and obey the mandates of party leaders, then does his position reach the degradation of contemptible servitude. So with the law of similars, and every other principle held dear by conscientious, thoughtful men. It would seem that the distinction between partyism and servitude is, after all, not very different. How honorable one! How contemptible the other!

* * *

A NEW YORK Medical Journal, whose felicity of diction and dignity of tone are only equaled by its unsoundness of sentiments, and whose columns are a standing credit to the English language, publishes a dangerously seductive editorial under the caption of "The Higher Plane." We use the word "dangerously" advisedly, because there are scores, even hundreds of readers who, mindful only of the truths contained in the arraignment of the various schools of medicine, are apt to forget the facts of history. After lamenting the deplorable shortcomings of medicine as it is practiced, the editorial concludes: "We have never seen it intimated that the unity of the medical profession is not a desideratum, and a condition that is likely to be accomplished—in time, but few seem inclined to help bring it about. This is the season when the National Medical Societies hold their annual meetings, and we would respectfully suggest to each of

these bodies that they appoint a committee of conference with a view to medical union. If broad liberal-minded men are appointed on all sides. men who will exact nothing humiliating of each other, they may be able through conference to report a tangible plan for consideration next year."

First, we may say that we do not believe any agency short of a special dispensation of Divine Providence could bring the Allopathic lion and the Homœopathic lamb to lie down together in peace in the sweet, green pasture of medical unity, where they could drink from the streams of fact, flowing from the fountain of truth, each the equal of the other, both the servants of humanity. Perhaps *THE SOUTHERN JOURNAL OF HOMŒOPATHY* may as well reiterate the experience of nearly a century. In the early dawn of the nineteenth century, a German physician, whose subsequent renown has filled the world, published some advanced thoughts and demonstrated facts for the benefit of his colleagues. He was set upon as a wild beast; his principles were ridiculed, scoffed at, denounced; his private character was assailed in columns of scurrilous falsehood; he was driven from city to city and pursued with a malignancy almost unexampled; and as late as the year of our Lord 1887 he was bitterly denounced in the sessions of the American Medical Association at Chicago, being, as we remember, referred to as "*the demented Samuel Hahnemann!*" And this treatment of the great Hahnemann is, we maintain, a just reflection of the spirit of Allopathy to-day so far as the acceptance of Hahnemann's Law of Cure is concerned. Allopathic physicians will have none of it; they even reject its advocates as impostors and scorn its principles as little short of infamous. The story is a long one, but the spirit, the methods, and the purposes of the so-called "Rational" school of medicine are truthfully and plainly stated when we have narrated the treatment accorded Hahnemann.

Correspondence From New York.

OUR LETTER FROM DR. FISHER.

LONDON, May 28th, 1839.

DEAR JOURNAL:

Before commencing my correspondence concerning the hospitals of this country, I will extenuate a little further on that which I saw and heard in New York and Boston that I think will be of interest to your readers, reserving my London letter for your next issue by which time I hope to have sufficiently viewed the ground here to give you a fair idea of the medical and surgical advantages of this great city.

And to commence with, I take it that considerable interest attaches to the work of the post graduate institutions of New York and that some, at least, of the subscribers of *THE JOURNAL* would like to know their statue and advantages as review institutions, at which to learn something of the latest and most approved methods of the profession of America's great medical and surgical centre.

There are two post graduate schools in New York, the Polyclinics and the Post Graduate school of Medicine and Surgery. The former has a commodation building and a large out patient clinic on thirty-fourth street, but a few doors from the elevated railway station; the latter is located between Second and Third avenues on Twentieth street, two blocks from the nearest elevated station. It also has a large and attractive building more neatly and conveniently arranged within than that of the Polyclinic, and it has considerable of a hospital in connection in which numerous surgical and gynecological operations are performed and witnessed by sections of the class. The Polyclinic has a hospital, also, but no capital operations, or but few if any, are performed therein, and only a chosen few of the physicians attending are extended its privileges. That the Post-graduate school's

building is better arranged, and it works more satisfactorily, systematically and promptly performed is above question. On the other hand the Polyclinic has by far the strongest surgical and Gynecological staff. In surgery it has Wyett, Gerster and Gibney and in Gynecology, Hunter, Paul F. Munde, Wylie and Sims, Jr. The Post-Graduate has several strong men also, the best known surgeons being Pitcher and Abbe and its leading gynecologists, Hanks and the younger Emmett. I have attended both schools from time to time, having matriculated at the Polyclinic, only, however, and am quite sure that for surgery and gynecology alone the Polyclinic is the better of the two. But, for a general review of from six weeks to three months, I believe the Post-Graduate school the best and this opinion is shared by many whose views I sought.

Both schools have made the mistake of putting in a few strong men and filling in with a padding of young favorites who don't know by practical experience a thousandth part of that which is known to physicians who come from all parts of the United States to learn, and who are compelled to listen to mere striplings on that which they have learned by rote from the text books. In a strong sense this is a positive imposition, for the fees demanded are sufficient in size and amount to justify an able faculty in every department. A general ticket for six weeks is one hundred dollars, and for surgery and gynecology alone for the same period seventy dollars. There are also a lot of extras as a rule. For instance, Dr. Coe of the Polyclinic gives a private course of considerable value in gynecology for twenty-five dollars, and Dr. Dawborn gives a good course in operative surgery on the cadaver for fifteen dollars. Both of these are valuable and a physician wanting to review in these departments

wants them, so it runs the fees up higher than a full course of lectures of six months duration. Then too, there is a special fee for a course on intubation and a special fee for the certificate of the institution. In fact for the easy-go-fashion in which the Polyclinics are allowed to slip along the fees are altogether more than is reasonable. They would not be too high if every man was promptly at his post, and if all took equal interest in their work. But as at present conducted, with the extras run in on the physicians attending the whistle is pretty dearly paid for. The greatest advantage attaching to these institutions is that attendance upon them secures admission to nearly every hospital in New York upon operating days and through this means operations innumerable can be witnessed at the hands of the best operators of the city, with one or two exceptions. For attendance upon the Woman's Hospital, special tickets of invitation are issued, and here again favoritism plays an important though not actually essential part. By watching the bulletin board closely, applying to the clerk regularly, and smiling upon the young miss at the office now and then, these tickets may be generally obtained.

That the information and benefit to be gained by attendance upon a course at either of the post-graduate schools of New York is decidedly great is beyond dispute and in the opinion of the writer all the younger men of the profession, and many of the older ones, too, would be amply repaid by taking a course there every few years. But that all they give and twice as much more should be dispensed for the fees they ask, is the general opinion of very many who expressed themselves on this point in my presence.

Several homeopathic physicians were in attendance at both schools and all were well and courteously treated. As a rule no questions are asked which will develop

the matter of pathy, but I found no inconvenience to arise from my open profession of my faith and practice, and as it is more honorable to sail under true colors I made no concealment.

* * * * *

A HOMEOPATHIC POLYCLINIC PROBABLE.

It is with no little satisfaction that I am able to announce to the readers of the JOURNAL that the New York Homeopathic College has in serious contemplation the establishment of a post graduate course in connection with its new college and hospital. This movement will be hailed with delight by the friends of Homeopathy throughout the United States, and its early completement will give very general satisfaction. Among our already large number of practitioners there are many hundreds who would gladly avail themselves of the post graduate course in a Homeopathic institution of the first class, where the facilities for studying the materia medica, surgery and gynecology were equal, should such a school be established, and it can hardly prove a doubtful venture for our New York College to organize just such an one at an early date. Besides a good attendance from our own field, it is quite certain that a considerable number of old school and eclectic practitioners would take advantage of an opportunity of this character to learn something of materia medica and practice. There is no reason why our college should not be able to give as complete and satisfactory a course in nearly every department of medicine and surgery as those given at the old school post graduate schools, besides a far better and more scientific course in materia medica and therapeutics. Let us have a Homeopathic polyclinic by all means and let us have it soon. The old school have no materia medica man to approach our Allen; they have no surgeons to outshine our Helmuth and our Doughty; they have no

kidney man ahead of our Dillow; no man on practice to outdo St. Clair Smith; no neurotist more capable than our O'Connor, and no physical diagnostician to surpass our Dowling. In only one or two departments does our New York faculty need strengthening to make it the full equal of the very best the old school can get together, and with the clinical facilities they now possess it is to be earnestly hoped that a Homeopathic post graduate school is a thing of the very near future.

* * * * *

THE ALUMNI BANQUET.

It was my good fortune while in New York to attend the banquet of the Alumni Association of the Homeopathic College at Delmonico's, and there to meet the faculty and many of the most distinguished graduates of the college. In every respect the banquet and meeting was a pronounced success, and especially so was a good part of the post prandial exercises, among which the response to the toast "the college," by Dr. Allen, and a poem by Dr. Helmuth, on "surgery," were the most felicitous. The JOURNAL correspondent was honored by being called upon to respond to "medical journalism," and in this connection allow me to say that a lively interest is attaching throughout the north to the growth of Homeopathy in the south, and the continuation of THE SOUTHERN JOURNAL is most warmly approved. I had many inquiries concerning THE JOURNAL and its new editor, and very many from young men who look favorably toward the south for locations. It is my firm conviction, from what I saw at Chicago, in New York and in Boston, that a much livelier interest is being taken in the southern association and THE SOUTHERN JOURNAL than appears on the surface; and the hearts of our northern brethren go out warmly to the young men in the south who are doing their best to push our school to the fore.

Through most kindly courtesy I have been called upon to address assemblages of physicians in all the cities named, and every allusion I have made to the efforts their southern brethren are putting forth has been most warmly applauded. Prominent physicians in all those points who so strongly opposed the organization of the Southern Association are now loud in their praise of its work and wish it every success; and especially do the physicians of New Orleans, Kentucky, Arkansas, Georgia and Texas, who have made it what it is, receive praise from all the American Institute workers whom I have met. I can most earnestly assure my brethren of the south that they have the hearty good will and cordial sympathy of the profession of the north and east in their efforts to spread the cause of Homeopathy in southern territory, and that it is confidently expected that much good will come of the work so well begun.

* * * * *

SOME PERSONAL ACKNOWLEDGMENTS.

During my stay in New York I was the recipient of numerous kindnesses at the hands of the profession, some of which deserve public acknowledgment in *THE JOURNAL*, since it was of, for, by and because of *THE JOURNAL*, mainly, that these courtesies were extended. In other words, but for *THE SOUTHERN JOURNAL*, your correspondent's name would never have been known to our wise men in the east. And here is a pointer for the young men of the south. He who is a sponger, absorbing everything and imparting nothing to his brethren through the journals and at the societies, but hides his light under a bushel and stands in the darkness of his own shadow. The good Book says it is better to give than to receive, and that he that giveth to the poor lendeth to the Lord. We are all poor in knowledge, and none so wise but that he can learn from the humblest of his

brethren. No physician has the right to draw himself into the shell of his own personality and do nothing for the general weal.

Through journalistic and association work the doors to hospitals, colleges, societies, clubs, and other professional organizations are opened to those who engage therein, and by this means your correspondent was granted a seat in the inner temple in New York.

The Helmuth House—Dr. Helmuth's private surgical hospital, was always open to us on operating days, and through the kindness of the genial surgeon and his son, who by the way is a rising young operator of great promise, I was enabled to witness a number of very important and instructive operations at their hands. Helmuth House is doing a most excellent work for Homeopathy, and its record of operations and results is highly complimentary to its surgeon and to the medication of our school in connection with surgical work. I am promised a resumé of the work done there for *THE JOURNAL* upon my return to New York this fall and am of opinion that it will prove "mighty interesting reading."

Dr. Doughty is one of the surgeons of Hahnemann's Hospital, and through his courtesy I was enabled to visit that institution and witness some highly interesting operations there. One in particular deserves mention, as it is the first of its kind on record. Dr. Doughty opened the pericardium of a young girl for pericardial effusion and evacuated twelve ounces of fluid, leaving a drainage tube within the sac by which to draw off more as it was proper. The operation was done with great care and skill and was a complete success so far as the amelioration of the distressing dyspnoea and high temperature was concerned. Up to the time I left New York, several days after the operation, the girl was doing well. The per-

icardium has been aspirated but not opened, and drained successfully that we have record of. It was indeed a treat to witness this operation, and to see the human heart performing its life work.

Laura Franklin Free Hospital for children was visited a number of times, but on two occasions operations by Dr. Wilcox, had to be postponed because of sporadic cases of scarlatina occurring within the building.

Through the kindness of Dr. Houghton, of the Eye and Ear College, the courtesies of the New York Medical Club were twice extended your correspondent, and he then had the pleasure of meeting a number of the veterans in Homeopathy who have belonged to the club for a quarter of a century. The club is purely a social affair, and as its membership is limited to twenty-four, it guards its doors with zealous care. Its meetings are highly enjoyable as may easily be imagined.

To Dr. St. Clair Smith—there is only one of that name—they haven't made any more—and his good wife we are under special obligations. The stranger within the gates of a great city doesn't always enjoy being "taken in." The writer recalls one instance in times gone by, when an effort was made on lower Broadway to take him in as he was standing gazing at the dazzling sights of New York's shop windows, which wasn't especially enjoyable; but it was not of the kind practiced upon Mrs. Fisher and himself by good Dr. and Mrs. Smith. Nothing less than a complete surrender sufficed to satisfy their demands upon us, all formalities being sacrificed to a downright jolly good time whenever suitable opportunity presented. And when at a very early hour in the morning these good friends found their way to the dock to wave us good-bye as our ship steamed out for distant shores they altogether won our affection and esteem.

In consideration of the numerous courtesies extended him by the profession of New York, during his sojourn in the city, THE JOURNAL'S correspondent desires thus publicly to make feeble acknowledgment.

* * * * *

THE MASSACHUSETTS MEDICAL SOCIETY.

Circumstances social in character having called me to Boston early in April, I learned from Dr. Talbott that the State Homeopathic Society would hold its semi-annual session in that city the next week, and upon his earnest solicitation I promised to return to attend the meeting. So, in company with Prof. J. C. Wood, of Ann Arbor, who was spending a few days in the east, and Dr. S. H. Vehslage, of New York, whose friendly acquaintance we had formed, we betook ourselves to Boston for that purpose, and an enjoyable occasion it was. The meeting was a decided success, and above a hundred thoroughly representative physicians were present, among them a goodly number of ladies. The papers of the afternoon session of the first day were on practical subjects, the bureau of clinical medicine engaging its time with a discussion of Typhoid Fever, the subject being treated of under headings of statistics, history, ætiology and diagnoses; treatment, medicinal and dietetic; sequelæ, and purpura hemorrhagica. Some of the papers were quite elaborate and the subject was treated of thoroughly and in a practical manner.

The bureau of obstetrics discussed dystocia from faulty condition of the soft parts; the third stage of labor; hyperemesis of pregnancy, and triplets. The discussion took quite a wide range and many practical points were adduced. I am sorry I did not take notes on the papers and discussions of the afternoon for THE JOURNAL.

In the evening the banquet of the association was held at the Thorndyke Hotel and was largely attended. Among the after-dinner speeches were three which will be passed down to posterity in the *New England Medical Gazette* and which are worthy of a place in all our journals. The first was by Dr. Conrad Wesselhœft, on "Hahnemann: his relation to Science," the next by Dr. Walter Wesselhœft, on "The Position of Homeopathy Defined," and the third was by Dr. T. F. Talbot, on "Law and Medicine." It would be difficult to name three more careful thinkers in our school than these gentlemen, and as a result a profound treat was enjoyed by those present. The Wesselhœfts are cousins. The paper of the elder, Conrad, on the relation Hahnemann occupied to science, was a gem of neatly worded caution against man-worship and a plea for greater attention to Hahnemann's methods, practice and teaching, rather than to the master himself. Progress and improvement was urged as against self satisfaction with what Hahnemann taught. The younger, Walter, most clearly and succinctly defined the position Homeopathy occupies, sandwiched as it is between "that dominant and exclusive portion of the profession which proclaims itself the sole keeper of all professional knowledge and ethics, and that infamous class of freebooters whose advantage it is to acknowledge neither science nor law," and we doubt if his definition of the place we occupy as a medical system has ever been equaled or ever will be surpassed. I hope that every journal of our school will produce it entire from the *Gazette* for May, and that it will be largely distributed in leaflet form, to intelligent laymen.

Dr. Talbot took a new departure on the subject of legislation, and one that is worthy of careful consideration. He recommends as a partial remedy for the abuse of

medicine that it shall be made a punishable offense for any one in any way to announce himself a practitioner of medicine in any of its branches who has not secured the degree of Doctor from some legally constituted power. This would put down those self-appointed quacks who prescribe for the sick without a medical college education, and in this way it would tend to protect the people and the profession from unskilled rogues who blatantly advertise their great ability. It is not too much to say that a clause should be inserted in every medical law covering just this point and we hope it will be done whenever medical legislation is being agitated. Restrict the practice of medicine to men and women who are bona fide graduates of bona fide colleges, and you will have accomplished about all that can be done in this direction and about all that is necessary.

The second day of the meeting was spent in a visit to the Westboro Insane Asylum and the Bureau of Insanity and Nervous Diseases made its report there, discussing Paranoia, General Paresis, acute mania, Acute melancholia and feeding, and Cerebral Surgery and Localization.

It was not possible for us to attend this meeting as we had to return to New York before the train would arrive from Westboro, a disappointment which we by no means relished.

At Boston as in New York a lively interest was taken in the affairs of southern Homeopathy and its journal, and unusual courtesies were extended the writer as a representative from the south.

In my next letter I will tell you something of the medical schools and hospitals of London.

C. E. F.

Subscribe for and advertise in the Southern Homeopathic Journal.

Annual Address

DELIVERED TO THE HOMOEOPATHIC MEDICAL SOCIETY, OF THE STATE OF KANSAS, BY PRES. S. A. NEWHALL, M. D., OF NEWTON, KANSAS, AT EMPORIA, KANSAS, MAY 1ST, 1889.

MEMBERS OF THE SOCIETY.

Ladies and Gentlemen:—To-day our society has reached her majority; to-day we celebrate her 21st anniversary.

To my mind it is eminently fitting that we, as believers in the only known law of cure for the ills of mortal flesh, to gather year by year, and tell our professional experience; talk with one another of our successes and failures; telling of the means of one and of the causes of the other. Imparting to each other the information, obtained by the year's experience, either in the use of the newer remedies, or modes of practice, or the new virtues discovered in the older ones. Telling each other of the practical expedients that have been most effectual in relieving the suffering ones, and in disappointing both the destroyer and the undertaker.

Also, it is well for us to inquire what the signs of promise are in the future of our school, or branch of the profession.

I said we are believers in the only known law of cure. For our friends, self-styled regulars, say they know of no law by which to be governed, and consequently each one is a law unto himself; like the Hebrew nation in the time of the Judges, 17 : 6, "every man does as he pleases," or as some other fellow has done.

They claim of late to be the only true eclectics. Robley Dunglison says of the eclectic school of physicians, a sect of physicians who professed to choose from other sects all the opinions which appear to them best founded, and then adds: "every judicious physician must be an eclectic;" and true to their creed they are appropriating homeopathic doctrines as fast as they can plagiarize them and deceive the dear people. They say openly

that they have as good a right to use homeopathic medicines as any one, or as we have, and I guess they have. But it seems to me it would be more manly, and show more real self respect to acknowledge the authors, giving due credit. But NO, they want the credit of discovery, and consequently they are discovering every day NEW PROPERTIES in the OLDEST DRUGS, that have been published in our text books, and taught in our schools for from forty to nearly one hundred years.

Prof. Roberts Bartholow, in 1882, in an article in the *Medical News*, says, in substance; "During the past year I have been experimenting to ascertain the relation of the dose to the effect produced, and discovered that many drugs, naming calomel, or *mercurius dulcis*, and ipecacuanha, have a dual action, that is an exactly opposite effect in a large dose to that of a very small dose." The very essence and explanation of our law of cure, upon which our school is founded.

So in all their experimentation, they are constantly stumbling upon our vital principles.

At a meeting of the French association for the advancement of science, held at Grenoble, France, in 1885, Drs. Bourru and Burot presented a paper on the action of medicines, reporting experiments to illustrate the power of medicines to effect the constitutions of sensitive persons without absorption, and without contact. The experiments were submitted to the critical investigation of Dr. Duprøng, director of the school of naval medical officers at Rochefort, who undertook a strict investigation, aided by the professors of the naval school, and naval medical officers. The experiments were repeated with every precaution, and when the paper above mentioned was read before the French association, Dr. Duprøng endorsed the statements and referred to

his own experiments, which had been very startling to him, and which he could not explain though he knew that no assumption of fraud was in the least admissible. The subjects of the experiments which were performed in the hospital at Rochefort in 1885, were a young man of twenty-two years and a young woman of twenty-six; both of a hysterical or nervous organization.

The medicines used were held a few inches behind the patient's head, the liquids contained in a bottle, the solid substances wrapped in a paper, the patients knowing nothing of the nature of the experiments.

The narcotics all produced sleep, but each had its characteristic features; opium, chloral, atropine, narceine, codeia, thebaine, narcotine and apomorphia. In the verification of these experiments by Dr. Duprong an incident occurred serving to show that the thoughts of the experimenters had nothing to do with the production of the effects.

The professors were present when a gentleman who had two similar bottles in his pocket, wrapped in papers, containing one valerian and the other cantharides, held up to the patient which he thought contained cantharides. To his surprise the effects which belong to valerian were produced, and then he found that he had made a mistake and was holding up the bottle of valerian."

My object in reading these extracts from the *Medical Advocate* of December 1885, is to show that skeptics of other schools who ridicule our faith in high attenuations and infinitesimal doses have plenty of proof of the subtle power of potentized drugs, if they will but open their eyes.

There are yet undiscovered latent and occult forces all about us and continually coming to the light that will yet astonish us and startle the world. During the past

year one of these silent but potent forces, that we all possess to a greater or less degree, has forced itself upon my attention. In almost every considerable town or village, charlatans under the name of magnetic healers have appeared, many of them of a disreputable character, nearly all spiritualists of one grade or another; some professing to be actuated by the spirit of some dead Indian and thus playing upon the superstitious credulity of the ignorant, or the highly impressible among all classes, and nearly all have produced remarkable cures, or at least have given prompt, though it may be temporary, relief from acute suffering, and some have taken cases that were worn out from nerve exhaustion by the action of drugs upon a sensitive organism, and given up to die of inanition, and by the subtle power of animal magnetism, or nervanric force, have rallied the life forces and restored them to complete health.

It was my good fortune to meet one of these healers, so-called, who did not mix himself up with any of these quack absurdities; he assured me that I had this latent force in myself, and could use it as well as he, to reinforce exhausted vitality and aid the action of appropriate remedies. I have investigated carefully and learned a part of the principles upon which this force acts and the rational mode of its application, so that I have made remarkable cures in the past six months, by aiding the action of the appropriate remedy, rallying the exhausted force to react to its subtle but potent impression.

We mingle with each other in society; we meet with those though perfect strangers, who are at once congenial spirits, are attracted to each other, we know not why; others we meet who are repulsive, and we feel relieved when away from their association. We meet those who impart to us strength by a word or a look.

We meet, too, those who in the sick room allay pain as if by magic, by the gentle pressure, or the soothing stroke of the hand—their very presence in the sick room quiets the nervous excitability of our patients. Again we meet others whose mere step will rouse all the nervous excitability the patient is capable of exhibiting. All this has been looked upon as a matter of chance or whim of the patient, instead of a potent force to be sought out and intelligently applied.

There are probably from one to four in every hundred who have this power, so as to be utilized and I think a very much larger proportion among physicians, more especially those who practice from a pure desire to relieve suffering.

What we want to do as a profession is to take this out of the hands of quacks and charlatans, and place it where it belongs as a remedy, as we have electricity and galvanism; using it intelligently, condemning all superstition and quackery connected with it, for spiritualism has no more to do with it than it has with any other force in nature.

It is our duty as physicians to utilize every force in nature which can be made to subserve the interests of humanity in the relief of distress; and this powerful though subtle force *can* be so applied as to allay nerve irritation, equalize the circulation of nervous fluid, disperse congestion, rally dormant nervous energy, free obstructed capillary circulation, and send the blood bounding out through the peripheral capillaries of the skin, and of the extremities, relieving the overburdened vital organs, and nerve centres, relieve habitual cold extremities, cure night sweats, pulmonary debility and most if not all the results of exhausted nerve energy.

But time will not permit further elucidation of this principle. We are here as the advocates of the only recognized law

of cure; we are here to impart to each other the experiences of the past, and to vie with each other in developing the future of our noble art; we are here to aid each other in sustaining truth, and in the suppression of error, to vie with the Son of God in destroying the works of the devil. Let us prove all things, holding fast that which is good.

In our deliberations let us have the fullest charity for the views of others, showing up error in kindness by the light of truth, and seek out the pearls of truth from the midst of the rubbish of error.

May the allwise Father guide us and aid us by His blessing.

Dyspepsia.

F. B. SHERBURNE, M. D., EMPORIA, KANSAS,
READ BEFORE THE KANSAS STATE HOMEO-
PATHIC MEDICAL SOCIETY, AT EMPORIA, KAN-
SAS, MAY 2ND, 1889.

Dyspepsia is a state of the stomach in which its functions are disturbed without the presence of other diseases, or when, if other diseases be present they are of but minor importance. The symptoms of dyspepsia are various. Those affecting the stomach itself are loss of appetite, nausea, pain in the epigastrium or hypochondrium, heart burn, sense of fullness, or weight in the stomach; acrid or fetid eructations; pyrosis and sense of fluttering or sinking at the pit of the stomach.

The sympathetic affections are of the most diversified character. Dyspepsia being generally of a functional nature is devoid of danger. When arising from disease of the stomach itself it is of course more serious.

There is one form of dyspepsia of which we see but very little in the books of which I wish to say a few words.

The *key note* symptom of this form of stomach trouble is a gnawing, hungry sensation whenever the stomach is empty, water brash at night, heart burn, heavy feeling, acid stomach, mind weak and inactive, all symptoms are relieved by eating—head as well as stomach. There is no eructation of food. Sugar in any of its forms or starchy food will produce this trouble. Stop sugar and give anacardium 30.

• • Surgery • •

Some Abdominal Cases.

In this day of unusual surgical activity, where every cavity of the body, whether open or closed is considered a legitimate field for surgical work, each case of interest assumes importance, either in the way of diagnostic or operative value.

A few cases seen by me present some instructive features.

CASE I. A lady aged 45 exhibited a tumor fluctuating upon deep pressure, situated in the right lumbar region close under the ribs, a little posterior to the axillary line. There were the usual concomitants of chill and fever which indicate the presence of suppuration. As the case presented no urgency it was allowed to proceed without operative interference. In a few days the pus was discharged, quantity not to exceed four ounces. There was a history of vesical catarrh, of tenderness over lower dorsal and upper lumbar vertebrae. The question arose what is the origin of the abscess. Was it hepatic, nephritic, perinephritic or osseous?

From the site of pointing one might readily say we had a lumbar abscess, but the reason for so saying was simply that arising from location, but a topographical reason does not always include a pathological one. My colleague inclined to the diagnosis of vertebral caries, my own opinion formulated itself under the phrase perinephritic abscess.

Let us continue the history of the case. After discharging for some days there was still a sinus left. Patient improved in general condition, appetite returned, urine cleared up, and there was neither pus nor mucus in it. Much soreness remained and as the discharge continued

and seemed to be too much of a drain upon the patient, it was decided to lay open the sinus and have it heal from the bottom if possible. Consequently the sinus was incised apparently to its bottom, but it refused to heal.

A more formidable operation resulted in carrying an incision along the border of the lower rib and well down towards the crest of the ilium. The channels thus opened were well curvetted, and the cavity which extended over the liver and under the diaphragm and well down towards the kidney was packed with a sponge. It was thought that the origin of the pus had been reached and granulation of the wound would terminate the trouble. Within three or four days a large discharge of pus occurred through the bowel accompanied with great pain, and in forty-eight hours more the patient was dead. An autopsy revealed a suppurating kidney with its pelvis completely blocked up with an inflammatory product. The normal urine had been excreted by the well kidney. The absence of pus from the urine was accounted for and to that extent the obscurity of the diagnosis.

CASE II. Woman aged fifty presented a large tumor non-fluctuating, modulated, under borders of right lumbar and umbilical region, dullness and hardness continuous up under border of ribs, pain on pressure and without pressure, stabbing, lancinating pains, yellow skin, fitful appetite and temperature of 101°. Diagnosis cancer of liver. After a week or ten days a large discharge of pus from the bladder was accompanied with a diminution of swelling and the cancer of the liver seems to have run away through the urethra. Let us change our diagnosis to a pyonephrosis, and wait for an autopsy to confirm it.

CASE III. Woman aged seventy-eight, large abdominal tumor extending from

pubes to ribs and far beyond median line. Said to have developed from below upwards, patient much exhausted, no cachexia apparent under lamplight, saw patient but once. Prognosis, death; diagnosis, fibroid or fibro-sarcoma of ovary; autopsy revealed cancer of liver. The tumor which had started in inguinal region was liken an enlarged gland which had finally disappeared, the direction of growth and size of tumor perverted the diagnosis.

CASE IV. Man past middle age, tumor in abdomen, right side, movable, painless, well defined notch, no cachexia indigestion. Diagnosis, a floating kidney; ordered a bandage which is said to have given him much comfort. Saw patient no more till autopsy, when several months later a colloid cancer of mesentery was revealed. Why should these cases be recounted? The diagnoses are certainly not scintillating with brilliancy, yet the terminations were profitable both to the pathologist and the undertaker.

These cases serve to illustrate the difficulty of diagnosing abdominal diseases much more forcibly than the recountal of successful cases, especially those cases where no autopsy confirms the diagnosis and the recovery of the patient but adds increased uncertainty.

It is much easier at times to tell what does not exist than what does, even the process of exclusion, while limiting the possibilities, is not sufficient to establish the positive condition. Hence it is that every means of examination which promises enlightenment is hailed with delight.

One of the new methods of investigating abdominal tumors is that employed by O. Minkowski, which consists in first outlining the tumor with the stomach empty. The stomach is then distended by the administration of carbonate of soda, followed by tartaric acid. The tu-

mor is again accurately outlined, the stomach emptied by a stomach-tube, and the large intestine filled with water. For the third time the tumor's position is defined, and from these observations the diagnosis is formed. From one hundred and ten tumors thus examined it was ascertained that distention of stomach and colon moves the tumors toward the region normally occupied by the organs in which they were developed. The annual of the Universal Medical Sciences for 1889 thus formulates the conclusions arrived at.

1st. Tumors of the liver move upward and to the *right* when the stomach is distended with *gas*. On filling the intestine the growth moves upward simply, sometimes slightly to the right or left.

2nd. Tumors of the gall-bladder follow much the same rule as applies to those of the liver.

3rd. Tumors of the spleen move to the left and often slightly *downward* on distending the stomach. On distending the colon they move *upward* and usually to the *left*.

Movable tumors of the spleen which have left the normal position trust to resume it when the stomach and especially the intestine is dilated, and to produce again the splenic dullness which had been absent. The filling the stomach with gas is a very valuable means of distinguishing between an enlarged left lobe of the liver and an enlarged spleen. 4th. Tumors of the stomach can often be recognized at once when the stomach is inflated. In other cases the fact that the growth becomes broader, the boundaries more indistinct, the percussion more tympanitic, and isolated nodules more widely separated from each other, indicates that the growth belongs to the stomach. Circumscribed tumors in the region of the pylorus usually move to the right and *downward*. Tumors of the

transverse colon and of the omentum also often exhibit the same change of position when the stomach is inflated, but in many cases the growths of the stomach can be distinguished by the fact that they move in an *upward* direction when the colon is filled with water, etc., etc. There are many more conclusions, but enough have been quoted to draw attention to the mode of examination.

Much importance is also attached by the same author to inspection of the patient from behind, as changes of contour from this position indicate certain changes in size of liver, spleen and kidneys.

A very important adjunct to the diagnosis of perforating wounds of the gastro-intestinal canal is that developed by Senn, of Milwaukee, who introduces hydrogen gas per rectum and tests for its flame at the abdominal orifice.

Lastly we have the exploratory incision. This measure has doubtless been much abused and is really only safe in the hands of an expert. Not that the procedure is essentially dangerous, but in the hands of the novice is apt to be employed where an expert could diagnose the case without employing such a formidable measure.

The exploratory incision should really be the first step in an operative procedure for relief, and not the first step in diagnosis. Thus used it is one of the most valuable at command.

I have called attention to these methods of diagnosis, feeling that the subject demands the fullest discussion, and that the value of correct methods of diagnosis is only equaled by those of correct operative procedure.

Read by C. E. Walton, M. D., before the Kentucky State Society.

Traumatic Tetanus.

A thousand and one theories as to the cause of this formidable disease have been advanced by the profession, but like rheumatism its real cause in the system is as yet considered quite uncertain. My own idea of the matter is that the brain

nor spinal cord either becomes the seat of the disease, but that the symptoms indicating such a condition are only reflex, as there are no evidences, or very little, of blood poison, inflammation, or severe congestion of those organs shown by autopsies made of such cases, but, however, as we seem to be living in the very early morning of the days of great discoveries, perhaps we had best content ourselves for the present by trying to ascertain and practice the best methods of treating this most truly terrible condition or disease, if it can so be called. The circumstances under which we labor in treating this disease are generally against us, as the wounds producing it are frequently of a slight character and little attention is paid to them, until trismus or tetanus symptoms are already manifesting themselves. Then about ten chances to one the physician is called too late to amputate with any probability of relieving the case. As amputation to be successful must be performed before the trismus symptoms are very far developed, and before the disease has developed far enough to produce spasms. If, however, the disease has advanced thus far before we are called we must fight it out with such remedies as seem best to meet the case, and generally such fights are one-sided.

I have recently had four cases come under my supervision, and I will give them to you as they occurred with treatment and results.

Case one.—A young boy about a dozen years old caught his thumb in the machinery of a feed cutter, mashing the bone at the end and lacerating the flesh badly. He was quite mum about the matter, getting his mother to tie it up for him while he insisted that it was not much hurt. About the fifth or sixth day the condition of the boy was such that the parents became alarmed and I was

sent for. Upon arriving at the house, some eight miles from my office, I found the patient decidedly nervous with twitching of the muscles and a decided soreness about the jaws, and an inability to open them but a short distance. I immediately placed the young man under the influence of chloroform and amputated the wounded thumb. The patient rallied nicely and made a good recovery. The trismus and tetanus symptoms all passing away in a day or two.

Case two.—A child seven or eight years old was wounded in the palm of the hand with a toy pistol. I was called in about a week after the accident and found the hand badly swollen. The child already had tetanic spasms and decided trismus. I gave it *nux vom*, and *rhys tox*, but it died in two days, of asphyxia.

Case three was almost a fac-simile of case two. Cause, treatment and result the same, it also dying from asphyxia.

Case four.—A boy twelve years old run a nail in the bottom of his foot. I did not see him for two weeks, when the foot presented almost a normal condition, no swelling and the wound was healed, leaving a small cicatrix. The patient however, had been having spasms for two days, the muscles of the extremities and the muscles of abdomen were all tightly contracted, opisthotonos decided, and a decided soreness about the jaws. As I saw no chance for relief from amputation, I put him upon *nux vom*; no results. Then gave him *cannabis indica*, ten drops every hour, and from a sixth to a quarter of a grain of morphine every three hours. This treatment was kept up for a week with apparently no results except that the spasms were not quite so frequent. At this time a rash appeared upon the surface of nearly all the body, but was considered to be the result of the morphia. At the end of two weeks he was again put upon *nux vom*, but the

morphia was kept up. The spasms grew less from day to day, the muscles gradually relaxed, and at the end of four weeks the boy could walk without help, and the appetite and sleep had about fully returned.

Now one thing further as to the treatment. If there is anything in *similimums, nux vom*, is the remedy for tetanus. I once was called to see a man who had taken strychnine with suicidal intent, but his courage failing him, he did not swallow quite enough to lay him out, but made an excellent proving of the drug. When called I had about four miles to drive, and by the time I arrived his case had been passed upon, and there was really no cause for treatment. The patient was lying on his back with his hands clinching the head board of the bed, while his feet were pressed tightly against the foot board. The muscles were all tightly drawn and any attempt to relax them would throw the patient into a spasm. Even passing the hand suddenly between the patient's eyes and the light would throw him into a spasm. When the hands were relaxed from their hold upon the bed, he would twitch and jerk exactly like tetanus. I did not observe any symptoms of trismus, but the other symptoms were so striking that after experimenting with him for an hour or more I concluded that in this proving of strychnine I had found the *similimum* to tetanus, and that my patient had cured himself of a foolish desire to shuffle off this mortal coil.

Read before the Ohio Homeopathic Society on May 8th, 1889, by Geo. W. Moore, of Springfield, Ohio.

A Chronic Diarrhoea

THAT PERSISTED FOURTEEN YEARS,
CURED BY NUPHAR LUTEA.

Editor Southern Journal of Homoeopathy,

I have had under my care during the last seven months, an exceptionally interesting and intractable case with the

above complaint, that resisted the ordinary remedies usually administered, as well as the promiscuous experimental measures of the superannuated school.

History : Jonnnie H.—age 16, weight 98 lbs., spare built and bilious temperament. He has the appearance of a boy that has undergone some wasting disease. His growth is stunted, his flesh flabby, skin shriveled and yellowish. He tells me his present trouble originated when he was only two years of age, the attending physician at that time pronouncing it "summer complaint," and that the diarrhoea which at certain periods of exacerbations assumed the nature of dysentery, has continued uninterruptedly up to the present time, the only amelioration noticeable occurring in the fall.

The evacuations were characteristic of Podophillin, watery, painless and quite copious, yellowish in color and very offensive. They numbered from three to ten a day. No prostration immediately after, but a constant feeling of physical exhaustion. The kind, quality and quantity of food he subsisted on governed the frequency of the stools, consequently cautious dieting conserved his strength. His appetite was capricious and changeable, and his emaciated face bespoke an impoverished body. I at first gave him Pod. 3 and 6x, but a three week's trial of it proved its inefficacy. I then had recourse to the following remedies respectively, colc c 3, Hep S. 3, Phos Ac. 6. and Sulp 6. My courage and confidence had reached zero, but I recanvassed his case carefully, read much on chronic diarrhoea. and decided on Nuphar Lutèa 3x as the similimum. He took one dose every four hours and his improvement was immediate and permanent. He is now well and hearty, the evacuations having assumed their natural consistency.

J. H. LOWREY.

The Ante-Natal Life of man.

BY P. DIEDERICK, M. D., KANSAS CITY, KANSAS
READ BEFORE THE KANSAS STATE HOMEOPATHIC MEDICAL SOCIETY AT EMPORIA, KANSAS, MAY 1ST, 1889.

The ante-natal life of man, also called intra- uterine life, or the gestative period commences with impregnation and ends with parturition, a period of about 278 days. Of late there is a great deal of attention given to the prospective mother, how to prescribe hygiene, regimen and medicines for her in order to promote an easy and short labor. To accomplish this is a great boon to the mother and she will be always thankful for it. But how about the coming man ; what can be done for his welfare during the gestative period? To be "*born well*" is an everlasting blessing, yet how little thought is devoted to that subject. "Out of sight, out of thought," is truly applicable in this case. The mother soon forgets the sufferings of pregnancy and confinement, but the child bears the marks of intra-uterine life indelibly written upon its whole future life. "There is probably no nervous connection between the foetus and the mother, since no nerves have been discovered in either the placenta or the umbilical cord," but that there exists a strong sympathetic union between the two is certain.

The original minute spermatozoon of the father and the ovule of the mother, although of very small microscopical dimensions contain the essence of the coming new individual. The innate qualities of these essentials, the spermatozoon and ovule certainly influence the further development of the new individual life, but it is not altogether dependent upon them, because the development of the coming man, physically as well as mentally is largely under the control of the prospective mother. Her own physical and mental state during pregnancy is generally reflected and reproduced upon the offspring. It is apparent

to all, that during the 278 days of intra-uterine life an immense physical growth takes place and in regard to mental development I believe that it is nearly parallel with the bodily growth. The building of character commences far earlier than at the age of reason and I do not hesitate to state, that the *predisposition* to the character develops entirely during pregnancy, and that the mother can exercise the function of a teacher to the invisible child during the whole gestative period. Modern researches and careful observations bear me out, that this is a fact and not a mere assertion.

It is a law and as such implies rights and duties. The unborn child can justly demand the right treatment from the mother. When she pays no attention to hygiene and diet, the child has to suffer and pay the penalty all its lifetime for the transgressions of the mother. When she disregards morality and gives way to evil passions during pregnancy, the innocent unborn creature inherits an evil disposition, which is nothing less than purgatory to it in the future.

The mother can justly demand the right treatment for herself from every one but especially from her husband, from other members of the family and from servants. We all know that even the most normal pregnancies are accompanied by countless, untold disagreeable physical and mental sufferings. Here is the duty of the husband clearly in sight; he must be untiring and ingenious in inventing ways and means to avert or ameliorate all these disagreeable features from the condition of the mother. If the other members of the family, or friends, or servants are ignorant of the true state of affairs, the husband must lay down the law for every one and he must see to it, that prohibition prohibits in regard to that law. Great kindness and consideration must be given to her from every one and under all cir-

cumstances. How can she maintain a tranquil state of mind, when the husband speaks or acts harshly or unkindly, when older children give her no rest day and night, when servants are disrespectful or disobedient, when friends or neighbors speak thoughtlessly or excitedly to her? I venture to say that fathers and mothers as a rule, sadly neglect their duties in regard to this matter and mostly on account of ignorance, not knowing that the development of the unborn depends so largely upon the condition of the mother during pregnancy.

Now at last, but not in the least, the family physician may be heard from. He is called in sooner or later during this time to prescribe homeopathically for some physical derangements, or to give advice how to secure "parturition without pain." On these occasions he should not merely prescribe: *Ipec.*, or *Nux.*, or *Cim.*, or *Caulaph.*, or order an exclusive fruit diet, or enforce every day outdoor exercise, proper bathing, proper clothing, etc., but he should enquire into the treatment which she receives from her husband and others, and doubtless in many instances there is improvement in order and the physician should not neglect to call the attention of the husband to his duties during this period.

Let every physician do his duty and help, that the coming man can truly say:

"I was born well."

THE Illinois Homeopathic Medical Association passed a resolution at the late meeting demanding a more thorough course of medical education. This is true. It is full time something were being done to remedy the disgraceful state of affairs as they now exist in a great majority of the "colleges" of the country. Abominable diploma mills, disguised as medical colleges, are conducted solely for the amount of revenue they bring their managers. No wonder the doctor has fallen from the proud place he occupied half a century ago!

• • Gynecology • •

Acute Cystitis.

ITS PATHOLOGY, ETIOLOGY, SYMPTOMS, DIAGNOSIS AND TREATMENT, BY JAMES C. WOOD, M. D., ANN ARBOR.—READ BEFORE THE AMERICAN INSTITUTE OF HOMEOPATHY, JUNE 28TH.

Any lesion giving rise to the symptoms and sequelae present in acute cystitis as manifested in women, demands and has received by numerous writers, most careful consideration. Indeed the ground has been so thoroughly traversed that there is little opportunity for an essayist to suggest innovations, or to relate experiences that are not already tried. There is, therefore, little encouragement, to work the literature for data. The acute stage of cystitis is of short duration and terminates either in resolution or merges into the sub-acute or the chronic forms, in which the pathological changes are much more decided and the range of treatment much less restricted.

Acute cystitis in women is a disease probably more frequent than the student is led to infer from the teachings of many of our more prominent gynecological authorities. While it is a lesion not confined to women yet the anatomical peculiarities of the female bladder make it an organ easily invaded either through the urethra or through the walls from above. The uterus and adnexa posteriorly and superiorly frequently implicate it in a reflex way or by direct transmission, while the vagina is lined with a mucous membrane often the seat of specific or non-specific inflammation which is readily conveyed through the urethra to the bladder. Again the numerous injuries following in the train of parturition are still other reasons why the organ is so often the seat of inflammation.

In its pathology there is nothing peculiar or remarkable. The changes will

vary somewhat according to the severity and violence of the attack, yet they are not unlike those found in inflammation of any mucous membrane.

At the outset the existing hyperaemia gives the membrane a bright red appearance, which soon becomes swollen and relaxed. At certain points the epithelium will be destroyed, particularly at the summit of the rugae, between the folds of which and in the sulci, pus is usually found. These, in brief, are the ordinary changes incident to the disease. Occasionally the destructive process is much more decided, especially in certain cases following prolonged distension. The whole mucous and sub-mucous tissues may become involved, the entire lining membrane of the bladder being shed or cast off *en masse*. Usually this accident is post puerperal, at which time the general congestion and succulency of all the pelvic organs would favor it. During confinement pressure upon the neck of the bladder or upon the urethra causes tumefaction of the parts and consequent obstruction. As a result the urine is retained for an indefinite length of time, the dribbling from the over distended organ deceiving both nurse and physician, until the excessive intra-vesical pressure cuts off the capillary circulation from the mucous membrane, causing in due time its partial or complete death, after which it is exfoliated and cast off. This at least is the explanation given by Liston and it seems a very probable one. Skene suggests that where the distention has been sufficiently great to cause separation the death of tissue may be due to excessive congestion following sudden emptying of the organ. The succeeding changes are those of chronic cystitis, with which this paper is not to deal.

The etiological factors of acute cystitis are both numerous and varied, some hav-

ing already been suggested. There is not a consensus of opinion as to whether or not it ever occurs as an idiopathic affection. While not as profoundly impressed by the causes giving rise to general pelvic congestion as are the uterus and the ovaries, yet the blood supply of all of the pelvic viscera is derived from the same general source, and it therefore requires no great stretch of the imagination to believe that cold or undue exposure may excite cystitis. However, in the vast majority of instances the trouble may be traced to unmistakable exciting causes, and it is reasonable to believe that women of scrofulous tendencies of other mucous membranes, are more liable to have catarrh of the bladder when exciting causes exist than are those free from constitutional bias. At any rate the slightest irritation or exposure will, in some women, cause irritation or actual inflammation of the bladder.

Of the various exciting causes none is more important than parturition, to the improper conduct of which many a mother owes her invalid life. Cystitis is here produced either by the undue and prolonged pressure of the foetal head, retention of urine, or by septic invasion, all preventable causes in most instances. Of those originating from within the body abnormalities of the urine are to be noted, yet in a bladder perfectly healthy it is difficult to comprehend any unnatural condition of the urine sufficiently marked to excite an inflammation. Unfortunately many bladders are not perfectly healthy, being at all times more or less congested and irritable, a condition that may be fanned into true inflammation by urine loaded with lithates, or with pus. Abnormal urine is, however, oftener the result than the cause of cystitis. Of those originating from without the body we may enumerate teamatism, the introduction of foreign bodies by masturbators, un-

cleanly and unskillful catheterization and unnatural or violent coitus.

The bladder, like all other organs of the body, is predisposed to inflammation by any condition causing a chronic congestion. Disorder of the heart, liver and kidneys act in this way. Again in acute examthematous diseases the vesicle mucous membrane may sympathize with the tegumentary tissues and even become seriously involved. The well known action of certain drugs upon the urinary tract, we as homeopaths are perfectly familiar with and will recognize their disturbing influence in looking for etiological factors. As has been intimated under the head of pathology, diseases of contiguous organs may implicate the bladder. Whether or not the inflammation produced by gonorrhoeal infection differs from non-specific inflammation is at the present time *sub-judice* and it would be an intrusion upon your time to discuss the question here.

Acute cystitis while often giving rise to symptoms most decided and pronounced, does not affect the organism as does the chronic form. In the simple types of catarrh the symptoms appear suddenly, there being a sensation of distress and weight back of the pubes, with increased frequency of micturition which is more or less painful. The degree of tenesmus varies according to the extent to which the vesicle neck is implicated. The urine is but little changed, is slightly acid or neutral in reaction and may be clouded. The specific gravity remains unchanged and if there is a sediment it will contain an increased quantity of leucocytes with or without phosphatic crystals.

Even when acute cystitis is purulent from the outset the general disturbance may not be very great, except, as Richardson observes, in those attacks due to bacterial invasion following labor. In these cases the onset is announced by a severe rigor, followed by a temperature

-ranging from normal in the morning to 103° or 104° F. in the evening. The hypogastrium may become very tender and the dysuria and tenesmus unendurable. In the purulent form the changes in the urine are more decided, it being ammoniacal, invariably alkaline, and containing pus and blood in varying proportions. The sediment contains besides the blood and pus corpuscles, triple phosphate crystals, bladder epithelium and bacteria.

It is not within the province of this paper to discuss those forms of acute cystitis which occur as a local expression of severe constitutional diseases, as diphtheria, erysipelas or croup. They are always of serious import and demand of the attendant prompt and vigilant treatment.

There may be some difficulty in differentiating acute cystitis from acute urethritis, especially if the subjective symptoms alone are relied upon. Severe pain in the latter trouble occurs only during and lasts but a short time after micturition. It is also said that there is an oozing of pus more or less continuously from the urethra in urethritis, whereas in cystitis pus escapes only during micturition and the urine which escapes last is more cloudy than that first discharged. The uncertainty of this test is, to my mind at least, very great.

When the pus comes from the kidneys there will be more albumen than can be accounted for by the total quantity of the pus and blood present in the urine. Again in renal diseases the tube casts and the absence of the pain during micturition and in the region of the bladder ought to direct attention to the kidney.

In prolapsus uteri there may be frequent urination not unlike that produced by cystitis, but the normal condition of the urine and the aggravation arising from standing or walking, will at least suggest the cause of the trouble.

The dysuria arising from vesical neu-

roses is characterized by its sudden appearance. If there is any change in the character of the urine it is of a purely temporary character. In adhesions of the bladder the desire to empty the organ is only urgent when it becomes partially distended. The urine would also remain unchanged. Fissure of the bladder can be positively determined only by the use of the endoscope.

In the treatment of cystitis prophylaxis is of the first importance, and the various causes enumerated should be carefully avoided or removed. Unclean catheters should be banished from the lying-in and the operating ward. Any form of hard instrument with the possible exception of the glass tube suggested and used by Kustner should be discarded because of the difficulty in keeping it perfectly aseptic. I much prefer the velvet eyed soft rubber instrument because, if perfectly clean, it is non-irritating and its inexpensiveness enables each patient to have an instrument of her own. Where repeated catheterization is necessary a new one should be substituted every two or three days. After use it should be carefully washed and cleaned by forcing a stream of water through it and then immersed in a ten per cent. carbolyzed solution until again required. The vestibulum should always be carefully washed before introduction. Unless absolutely necessary catheterization after operations should not be resorted to. Even after abdominal section the patient is usually able to urinate with much less distress than the introduction of the instrument causes, and experience has fully demonstrated the harmlessness of permitting healthy urine to come in contact with plastic operations. With the possible exception of vesical fistula I no longer draw the urine unless in those cases where swelling and tumefaction has temporarily occluded the urethra, or when owing to some peculiarity of the

patient, she cannot urinate while in the recumbent posture.

On the other hand, the operation is frequently called for in post-puerperal conditions, and the importance and necessity of examining the bladder carefully during the first few days of the puerperum can not be too indelibly impressed upon the mind of the student. A very large proportion of the cases of cystitis date back to childbirth and in no instance should the statement of either the patient or nurse be relied upon as regards the passage of urine, especially if there be dribbling. In consultation with Dr. J. W. Wheelock, of Bancroft, Michigan, I once saw a parturient woman moribund, with symptoms of septicaemia and uraemia, where the bladder reached the umbilicus, giving to the abdomen the appearance of tympanitic enlargement, so great was the distention. Catheterization rewarded us with two large sized *pots de chambre* full of urine which two distinguished men of the *regular* school had permitted to accumulate. The obloquy is thus permitted to fall upon that school because Skene in his latest work, and in almost the same language, charges the same negligence "to a member of the so-called *new* school."

Abnormalities of the urine when they do exist should be corrected and haemorrhoids, fissures or any disease of neighboring organs should be removed. *Necessitas tollendae causae* is quite as evident in the treatment of cystitis as in the treatment of any other inflammation.

In the management of an acute cystitis, rest more or less absolute should be insisted upon. The recumbent posture should be maintained and if the vesical pain and tenesmus are very great much relief will be afforded by the hot sitz bath or vaginal douche. If the urethra is also implicated a stream of warm water falling upon the external meatus for ten or fifteen minutes three or four times per day

will often relieve suffering to a marked degree. Concentrated and irritating urine can be diluted by permitting the patient to drink freely of either water, milk or some mucilagenous fluid. The diet should be unstimulating and bland, milk being the best of all articles. These precautions, in conjunction with the homeopathic remedy will, in probably the larger proportion of cases of acute aseptic cystitis, accomplish a cure. Acconite, belladonna, cantharides, cannabis sativa, chimaphilla, mercurius cor. and arsenicum comprise a list of remedies frequently useful. After a duration of a week or longer without manifest improvement, the disease will have assumed a sub-acute or chronic character and may demand more direct local medication, the method of applying which is without the province of this paper.

Paper of Dr. Albert Claypool, Toledo, O.

Mr. President, Members of the American Institute of Homeopathy.—The Bureau of Gynecology comes before the Institute without any extended resume of the progress in this specialty during the year just past. There has been an advance all along the line, but it has been of a more conservative character than that of a few years ago. While there has been no great achievement recorded during the year, yet there has been a healthy growth. The profession is giving more attention to the entire field of gynecology—calmly and retrospectively, looking over the work of the last decade and assigning to the bold measures introduced, the merits and demerits belonging to each.

Probably the most interesting operative measure under observation during the year, has been that for overcoming pernicious displacements of the uterus by shortening the round ligaments.—Alex-

ander's operation. This operation has resulted in some apparently perfect cures, but it is hardly probable that any large per cent. of such displacements can be permanently relieved by it. Few cases will be found where the round ligaments can be made, and kept, tense enough to hold in suspension a sub-involuted uterus after that organ has permanently lost its other natural supports. However, in time it will find its legitimate place among surgical measures.

The treatment of urine fibroids by electrolysis has not been crowned with the success on this continent, that it has in the hands of Apostoli.

A so-called rapid cure of cystitis in women has been introduced by Dr. Madden, and reported to the *British Medical Journal* March 1889. Dr. M. dilates the urethra with an instrument until he can pass the index finger unto the bladder, and for a time, paralyzes the spincter vesicale. In some cases he removes the proliferating mucous membrane with a dull wire curette, but in all cases he makes local application of carbolized glycerine to the mucous surface of the bladder. Through a speculum, a pleglet of absorbent cotton saturated with glycerine of carbolic acid (B. P.) is introduced, and brought in contact with the fundus of the bladder. It is allowed to remain two or three minutes until every part of the vesical wall contracts upon the cotton, after which it is withdrawn and the urethral canal is brushed out with the same medicament. Pain is prevented by first applying to the surfaces a solution of cocaine. According to the author, this treatment seldom requires to be repeated more than two or three times, at intervals of a week, to result in a cure of the most persistent case of cystitis.

The application of therapeutical measures in gynecology is receiving more attention than was the case a few years ago.

Many cases are now receiving medical treatment that would have been subjected to a surgical operation.

Of new instruments for the gynecologist, there has come under my observation none of sufficient merit to warrant me in using your time in giving a detailed description.

The literature in this field of study is constantly receiving additions. One of the contributions since our last meeting, other than that in medical periodicals, that of the most interest to us is "A Text Book of Gynecology," by A. C. Cowperthwaite, M. D. This work is conservative in surgical measures, yet to the homeopathic physician it will prove very valuable, because it gives us a very plain and concise description of the diseases peculiar to women, together with their homeopathic therapeutics. The next in importance, is the completion of "American System of Gynecology" by Matthew D. Mann, M. D., and "Diseases of Women" by A. J. C. Skene, M. D. The latter is of more than usual interest to me just now because it gives such prominence to the important subject selected for the consideration of this Bureau today.

The Bureau of Gynecology has selected as a subject for discussion at this session Urethritis, and Cystitis in Women, and anomalous affections of the urinary organs in women. For years Gynecologists have seemed to ignore the bladder and urethra and their diseases, except in a desultory sort of way. The uterus, and its appendages was the goal and anything else simply an incident by the way. Operative measures or local treatment, occupied the minds of most of the gynecologists of the day to the exclusion of therapeutics. We of the homeopathic school caught the infection and have kept to the front in operative gynecology, but in the rush for fame and fat fees we have some-

times failed in keeping the Homeopathic *Materia Medica* to the front.

The June issue of one of our homeopathic journals by copying the announcement of the chairman of this bureau and ranging it by the side of a bureau announcement of a younger homeopathic association, endeavors to discredit by implication, if not in actuality, the methods adopted by this institute, in obtaining gynecological and other data.

Now, therefore, that I may not be misunderstood let me say here, that I am one of the number who believe that a homeopathic physician's knowledge of disease should not end with symptomology. He should know its etiology and pathology as well. With the Homeopathic *Materia Medica* as a basis he should add thereto mechanical, surgical and local means of cure, and be ever ready to carefully consider anything that gives fair promise to benefit his patient, then is he a physician in the truest and broadest sense of the term. On that broad and liberal basis I submit the work of this Bureau for consideration and discussion.

As we look up the history of the knowledge of diseases of the bladder and urethra in women, we learn that some of them were recognized and methods of treatment practiced by physicians thousands of years ago, which in the course of time were lost sight of only to be rediscovered by succeeding generations. The probable cause of this lost knowledge, and the failure to advance the study of these diseases, was the fact, that during the middle ages men were not allowed to practice obstetrics or gynecology for fear of offending female modesty, and post-mortems were considered sinful. During the fifteenth and sixteenth centuries, however, some systematic study of diseases of the female urethra and bladder was made, but there was no instruction given in gynecology until late in the eighteenth

century. Even to-day many teachers of gynecology give these organs but slight attention. The medical profession did not possess a single monograph of diseases of the female urinary passages until 1854, when Scanzoni first published his investigations. Since that date, G. Simons, F. Winckel, A. J. C. Skene, C. Cushing, Clifford Mitchell and a few others, have done much to popularize this subject. Yet at this time the truth compels me to say that there is a lamentable indifference—not to say ignorance—on the part of the profession, as to the causes and treatment of these diseases.

In studying diseases of the urethra and bladder, in women, we must bear in mind their anatomical structure and their topographical relation to other organs and parts in the pelvis. We should remember that they are particularly liable to external and mechanical influences. The free vascular supply, together with the functions of these organs, and their exposed position make them very liable to inflammatory diseases, while the intimate and common spinal and sympathetic nerve supply to all the pelvic organs makes the bladder particularly subject to functional and neurotic disturbances. We should know that the mechanical and reflex functional disorders of female urinary passages are much more frequent and often as distressing as the inflammatory. These facts should be constantly kept in mind so that we may be able to recognize the character of the disease coming under our care.

The liability of these organs to become involved in diseases; the frequency that such diseases are met; the intense suffering produced; the intractability of many of these affections; the difficulty in differentiating between the inflammatory and the reflex; and the lack of interest or knowledge—on the part of the profession in diseases of the bladder and urethra

ra, induces us to present this subject for discussion to-day. We hope that the importance of the subject will insure a large attendance at the sectional meeting. The fact that the dominant school have made so little headway in the treatment of these affections should spur us on to renewed effort in the application of our better adapted system of therapeutics. The law of similia is equally a law of cure in all curable diseases, when properly applied, but the application is much easier in some diseases than others. The symptomatology of inflammatory diseases of the urinary passages, when certain that the affection is inflammatory, is generally clear out, and well defined, making the law of similia easy of application. With this advantage in our hands have we made the progress in this field of medicine that we should? Answer for yourself.

We hope that our report for the year will be the means of stimulating further investigation, into the causes and treatment of diseases of the female urinary passages, which, if properly carried out, will result in credit to the physician, and great relief to suffering women.

Conciliation vs. Sectarianism.

We are constantly reminded by men of our own persuasion in medicine that we are a sect, men who are clamoring for conciliation and harmony between the two schools, homeopathy and allopathy.—These men quarrel among themselves, they disturb the harmony of our societies, they harass our journals with their dissatisfactions and make life a burden to themselves, and endanger the life of homeopathy, while the "regular" brother stands off and laughs at their writhings. Those would be dissenters from the true art of healing, are men who are anxious to establish a system of practice of medicine where all schools can meet and com-

mune together. They are made to feel the sting of their views by the "regulars" barring the doors of their societies and colleges against them; they long to partake of the good things at their board, and because they cannot they will raise a fuss in the societies of which they are members. Their object is a commendable one; there is no physician but what would like to see but one established school of medicine, but the means they would employ cannot be too forcibly condemned. To gain this result, they are willing to surrender, to condemn as false and hypothetical some of the principles that have made homeopathy what it is, an established science in the art of healing; principles that have done more to elevate medicine and to establish it as a science than all the work the "regulars" ever did.

Shall we give up what has made us what we are, a force in the science of curing disease and set us on a foundation which allopathic wrath cannot shake nor their bitter opposition stop in its onward progress? Never! We are homeopaths and we will remain homeopaths. We can well afford to stand by the colors that have waved over our victories when the battle of opposition waxed warm and the shells of scathing criticism and the vilest condemnation burst over our heads. Our predecessors in this battle for the right were few in number and their advantages few; they had few text books to guide them in their work; no journals or other channels through which they could communicate their successes to each other, and to the world; no colleges in which to teach the principles of Hahnemann; no hospitals or asylums in which they could demonstrate to an indifferent public, the true worth of their system of practice; they had nothing. But fired with a zeal and determination to prove to the world that they were not "quacks",

they met the army of "regulars" that had determined to crush them at one blow, and have done battle with them even unto this day. United they stood—not a dissenting voice in their ranks—with that grand motto written in letters of fire, *Similia Similibus Curantur*, ever before them to guide them in what they did, they have steadily marched on teaching the principles of a humane and scientific system of practice, acquiring strength at every turn, until now our bitterest opponents realize that we are not so easily crushed as they had hoped to find us, and recognize that we are a power to be feared; those who once gave us the dignified appellation "quack" and globulist recognize us as physicians. And I would ask why this recognition? Is it because they hate us less as a sect? Have they given up all hope of annihilating that Hahnemannian destructiveness that belongs to us and the name which we bear? No! They are as bitter enemies to that name as they ever were, but they have found that they could not accomplish their object by persecution, and they failed to control the legislatures though they tried to faithfully. So they have decided to adopt new tactics; they have raised the white flag, and ask for a parley. We meet them; they say to us, "surrender your name and denounce or say nothing of the law of *similars* and we will recognize you as physicians; we will meet you in consultation and invite you to our board, but cannot with grace reconcile ourselves to your law of prescribing. Give up these and we will receive you as brothers."

They approach us in this way that we may be thrown off our guard. They declare peace that we may fight among ourselves, and they hold out this alluring bait of conciliation upon neutral ground, to hasten the result, ah! how well it works. There are men in our school who are ready to take it up just for the

sake of peace, at the expense of total extermination of the only true law of cure. Now when we have chartered colleges all over our fair country; when the states recognize us and give us a place in their universities, hospitals and asylums; when we are supplied with as good textbooks and journals as our old school brethren can boast; when our number reaches the thousands and our adherents the millions; when we have dispensaries in nearly every city; in the face of all this shall we throw down our arms and seek peace? No; the battle was begun on homeopathic principles and we will show ourselves cowards if we don't fight it on homeopathic principles.

We are a sect in medicine from our views regarding the action of drugs in curing disease; these views being contrary to those entertained by another class of physicians, cannot help but make us sectarian, and with these views there can never be any conciliation until one or the other of these sects have declared their opinions and teachings erroneous, and acknowledge the truth of the teaching of the other school of medicine. There can be no neutral ground, there must be a complete surrender on the one hand or the other, and where shall that surrender be? Shall it be the homeopaths? Note the signs of the times and they will tell you; view the past critically and note the time when every homeopath, every follower of the law promulgated by Hahnemann, was classed among the astrologists and sooth-sayers; where the epithets "Quack" and "Globulist" were the titles given the believers in the law of similars by their allopathic brethren; where all manner of evil was said of Hahnemann's disciples; where they reasoned among themselves that such quackery, and such knavery could not live, and our total extermination was predicted by them. I ask you to look at all this and

then examine our present condition and compare them, and it will surely tell you which way the tide is running. Don't stop when you have thoroughly examined our condition and noted our progress, but pass on if you please, and inspect the camp of the "regulars." You will find them on dress parade, with their pocket cases filled with small phials, and elegant preparations; the lancet is broken, they no longer carry that instrument of blood and depletion, and in its place you will find Aconite which they give in small doses to do the work they once thought the lancet would do. But don't stop when you have found that they have discharged much of their former barbarianism, and have adopted the modern (homeopathic) storage, but go a little further and see if you don't find something else that they have borrowed or stolen, from homeopathy follow the "regular" to the bedside and watch him prescribe; you will find him giving Belladonna for cerebral congestion, Mercury for diarrhoea and dysentery, Glonoin for congestive headache and epileptiform spasms, Ipecac for vomiting, Nux vomica for the nervous depression following a debauch, etc., and you ask him why he does so, if he does not know that he is encroaching upon homeopathic grounds, and prescribing according to the law of similars, that he is stealing that which belongs by principles and by heritage to homeopathy. He assures you that he is not stealing from homeopathy; he will not admit the law of similars because it would hurt his conscience, but he goes on giving his medicine under the law of similars, and never thinks once of his conscience. He explains his actions by saying that his medicines act as alteratives, stimulants, sedatives, derivatives, etc., terms as indefinite as the system of mongrelism he practices, for he does not make all his prescriptions so well as

those I have referred to, and even in this he has none but an empirical law to guide him, but yet with all the empiricism it is plain to see which way their experience is leading them. He steals from homeopathy, but does not know he steals, or at least will not acknowledge it. He does not know the law of similars, and refuses to learn of us. Examine their literature on therapeutics and you will find the same departure from their old way of treating disease. They are denouncing heroic measures in medicine as being utterly useless and altogether harmful; they are splitting the old-time dose into several doses, and yet they find it large enough.

In the manner of prescribing and in the quantity given they are nearing, probably unconsciously, homeopathy; their system is an ever changing one, Hahnemann's law is unchangeable; they are gradually advancing from chaos to light, nearing the true law of cure, the law that has upheld homeopathy against every invasion that has been made upon it. Now in the face of these facts can we give up the cause, the law that has ever been a light along our pathway, and has prospered us until the enemy is about overcome and is gradually surrendering his old ways for our new ones? Can we or should we for the sake of conciliation give up the principles which are proven to be the most compatible to the welfare of the sick and humanity? Go back retrograde if you please, and join with them on a common level. No, we should not, we cannot, homeopathy has demonstrated its superiority, they recognize it and are coming to us, slowly it is true, but surely at last. They ask us to come back to meet them and to act in harmony with them, but we will not go; if they want harmony of action let them come to us, as they are gradually doing, as a casual observation will prove.

Why should men in our own ranks wish to defile the fair name of homeopathy by clamoring for conciliation is more than I can conceive. Our own duty is to advance the art or science of treating disease and not to tear down what has already been done and to join the allopaths on some intermediate ground would be descending from the position that we as healers of the sick now occupy. I do not claim that the homeopathic law is perfect and infallible, and our duty is to study it and improve it, to separate the wheat from the tares, let our work be one of advancement and improvement; stop quarreling among ourselves and work in harmony together for a common cause. We have a great work before us; let us do it with our might; work in harmony and in peace and success will crown our efforts. The allopaths will continue to follow in our wake, to profit by the work we have done, but we work for the good of humanity and not for a sect, and we shall make no complaint if the physician who calls himself a "regular" does cure his patients by similars.

S. W. JOHNSON, M. D.

The American Institute.

The American Institute convened in the parlors of the Hotel Lafayette at Minnetonka Beach, at 8 p. m., June 23rd. About two hundred members listened to the president's address, and before the meeting closed its labors for the year over one hundred more put in an appearance.

The report of the treasurer showed \$4,245 receipts for the year, disbursements for the same time \$3,624. The necrologist's report showed thirteen members had died during the year.

Judge Barrett's opinion was heavily sat down upon:

Mrs. Moore, of Medina, N. Y., superintendent of the department of non-alcoholic medicine, W. C. T. U., had sent in a memorial to the institute at a previous

meeting asking for the abolition of alcohol as a medicine. It was referred to a committee, of which Dr. N. R. Ludlam, of Chicago was chairman. Dr. Ludlam reported that the following communication, had been forwarded to Mrs. Moore:

We beg to inform you that as a school of medical practitioners we have always stood in opposition to the common and indiscriminate use of alcoholic liquors. We have opposed the old preparations known as "bitters" and "tonics," in which alcohol is the chief ingredient, and we have denounced the "whisky cure" for consumption or any other ailment, except possibly "snake bite." We would also say that the evils of intemperance and the responsibility of the medical profession have not escaped our attention. While we fully recognize these evils we are unable to assent to the teaching indicated in your letter, "that an element that is universally acknowledged to be the deadly enemy of a healthy human organism cannot be the friend of a diseased one." Our studies and accumulated experience have shown us a great number of agents that are inimical to the human organism in health, and yet very useful and oftentimes necessary to that organism in disease. We recognize the difference between poisonous or pathological doses and those of the same drug that may prove curative. As to pharmaceuticals and medicinal use of alcohol, we are persuaded that in some cases there are no proper uses for it. We oppose alcoholic liquors as a beverage and cheerfully second the worthy efforts of your organization for the extinction of the American saloon.

The bureau of Psychology attracted a great deal of attention. Dr. Couch of New York, took the stand that the will is not an entity, but rather a result in a chain of natural sequence. Drs. Kinne and Danforth put the divine back of the

will and explained all in this way.

The all absorbing and every interesting topic, *medical legislation* came in for its share of consideration and as usual elicited much discussion. The following resolutions were passed:

The American Institute of Homeopathy declares itself opposed to restrictive legislation, which tends to curtail civil rights, encroach upon personal liberty and check the progress of medical science.

Whereas, The American Medical association, through the several state medical societies, is endeavoring to procure state boards, with or without homeopathic minority representation; and,

Whereas, Such action, if carried to completion, will inure to the disadvantage, if not to the destruction of our school as a distinct organization, and act as a direct hindrance to medical progress, therefore

Resolved, That the committee on legislation of this institute be instructed to correspond and co-operate with the legislative committees of the state homeopathic medical societies in the procurement of separate boards of medical examiners throughout the United States, when such boards are to be established, and when it is impossible to secure such separate boards, to insist upon equal representation upon single boards.

Resolved, That the committee on medical legislation be authorized, if necessary to expend \$100 in carrying out the foregoing instructions.

The resolutions were carried unanimously.

Dr. O. S. Runnels, chairman of committee upon medical education reported:

"There are 128 private institutions which are turning out young doctors," the speaker said. "They are actuated more by a desire to make money than to teach the truth of medicine. And in their anxiety to graduate large classes they make

low rates, give an easy course and then give them diplomas which entitle them to be rated as physicians. Mountebanks are allowed to go on in the work without respect to the dignity of the profession. In no other country on earth is so great laxity found as in this. There must be a stop put to it. There ought not to be another school started in the next hundred years. There should be state boards of examiners to license physicians, made up of competent men, no one of whom is connected with a medical college, and the certificates granted by these boards should be good credentials in all states.

WANT REPRESENTATION ON EXAMINING BOARDS.

The special committee, headed by Dr. Cowperwaite, submitted a memorial to the life insurance companies. The paper held that there was unjust discrimination by the companies, in the fact that homeopathic physicians were excluded from the examining boards. The committee stated that there are 12,000 practitioners of this school in the country and thirteen colleges. The personnel of the physicians of this school is equal to that of any other and the patrons of the school are numbered by millions. The exclusion of homeopathic physicians was an injustice to a large portion of the community. The paper declared that the requisite should be the personal qualifications of the physician rather than his opinions as to methods of practice, and the life insurance companies were asked to take that view of it.

Dr. J. W. Dowling, of New York, chairman of the bureau of sanitary science, opened his report by the statement that if the proper hygienic rules were followed by the human race for the next half century a large proportion of the doctors would starve. His paper was a plea for more careful observation of the rules of health as the surest means of

preserving and regaining health. Many diseases, which are commonly attributed to mental strain, malaria or sewer gas, are the natural and inevitable result of excesses. A large class of diseases can be traced directly to the use of alcohol. The food comes next. Meat eaten by persons of sedentary habits is often the cause of nervous diseases. Many complaints may be remedied by dieting, and as a rule, all would be better if they worked their muscles more and their digestive organs less. A diet which is less irritating to the liver sometimes avails when the doctors of both schools fail with their medicines.

A complaint was read from a St. Paul lady on the general clatter and din which is made in great cities at midnight when the new year comes in. She thought this midnight din was calculated to do great injury to children and invalids suffering from nervous prostration, and she cited instances in her own experience. She asked the Institute to warn the nation of the dangers from this newly imported custom.

"I move the communication be referred to the Senate of the United States," said Dr. Dowling, and this motion prevailed.

HOW TO DRESS CHILDREN.—BY DR. GROS-
VENOR.

"It is absurd to think that a child can rest sweetly in a diaper, a bandage, a pinning blanket, a skirt and a double gown, as many a child is expected to do. It should be a study to make the physical life of our babies so perfect and happy as to realize the words, 'Heaven lies all about us in our infancy.'

Perfect freedom to all thoracic, abdominal and pelvic organs: that all the clothing shall hang from the shoulders: the greatest saving of the time and strength of the mother in caring for the baby, there being one pin instead of fifteen: the resulting health and comfort of the child:

the evenness of the covering of the body, there being the same covering over the shoulders as elsewhere.

THE "GERTRUDE SUIT."

The Doctor names the suit the "Gertrude suit," after his own little daughter, for whom the clothing was designed.—"The under garment of this suit should be made of nice fleecy goods,"—"canton flannel is the best material—cut princesse, reaching from the neck to ten inches (twenty-five inches long) below the feet, with sleeves to the wrists, having all the seams smooth, and the hems at the neck, wrist and bottom upon the outside—the latter turned over once and felled or cat-stitched with colored worsted—a tie and one button behind. This makes a complete fleece-lined garment that can be washed without shrinking. The next garment is made of baby flannel, also cut princesse, same pattern only a half inch larger, reaching from the neck to twelve or fourteen inches below the feet, with generous armholes pinked or scalloped, but not bound, and with two buttons behind at the neck, and may be embroidered at pleasure.—The dress cut princesse to match the other garments is preferable. These three garments are put together before dressing—sleeve within sleeve—and then put over the little one's head at once and buttoned behind, and the baby is thus dressed, but one pin being used.

At night the dress should be simply a canton flannel night dress and a diaper, the dress being not unlike the under-garment in the suit, only a little longer. The doctor maintained that it is absurd to think that a child can rest sweetly in a diaper, a bandage, a pinning blanket, a skirt and a double gown, as many children are expected to do. He scored the customary method of dressing babies. He made special indictment against the absurd "pinning blanket," one of

the "most uncomfortable and unhealthy garments ever invented."

"One side," he said, "is folded over one limb and the other over the other, and then the bottom is folded upon the thighs and pinned so that the little one cannot move a limb, at which he cries, and we say 'Colic!' and commence to dose him. This garment is an abomination and should be thrown away."

The conventional skirt and the bandage and the other articles of clothing commonly used for babies came in for a share of disapproval, and the doctor concluded that a more uncomfortable, unphysiological human dress could hardly be invented. It ought to be brought to the attention of the humane society. And so he brought forward the "Gertrude suit."

ELECTION OF OFFICERS.

The election of officers was a pleasant diversion. The nomination of president was first in order, and Dr. Pratt, of Chicago, was the first to set the ball rolling. The man he nominated was a gray-beard and a fighter from 'way back. For twenty-five years he had contended with the regents of the University of Michigan and finally came out ahead. He began the contest at a time when it was a state prison offense to practice homeopathic medicine in Michigan. Dr. A. I. Sawyer, of Monroe, Mich., was the man nominated. Dr. Ludlam arose and nominated Dr. George A. Hall, of Chicago. Dr. Grosvenor, of Chicago, seconded the nomination of Dr. Sawyer, and so did Dr. Obetz, of Ann Arbor. The latter paid a high tribute to the character of his candidate and what he had done for the cause of homeopathy in the state of Michigan. There was a time when the old school bragged that homeopathy would never come on that *university campus*. And yet it has come and the homeopathic students are treated exactly as well as the others, and they go out

with as good a medical education.

Dr. Hall himself made the most effective speech. He resigned his candidacy in favor of Dr. Sawyer. "I labor under an embarrassment," he said. "For several years now I have seemed to be a chronic candidate for this office. This was not my fault, but was due to the fact that some of my friends deemed that this honor was due me on account of my work in this Institute for thirty years. But I have always yielded in favor of younger men. The fact is that the position of president in this Institute is not worth as much as it once was. The dignity of the office has been lessened by wire pulling and political log rolling. By means of it young men whose pin feathers have hardly come through the integument have come to the front. But I have acknowledged to my friends that I am no longer a candidate, and I want them all to vote for Dr. Sawyer."

Dr. Sawyer's election was accordingly made unanimous. The new president of the institute is sixty years old. He graduated in 1854. He first practiced in Ohio, but went to Monroe, Mich., in 1857, and has lived there since. His fight in that state for homeopathy was a hot one.

Dr. C. G. Higbee, of St. Paul, was elected vice-president on the motion of Dr. Dowling. "I will tell you all about him first:—He is 53 years old and weighs one hundred and ninety-six pounds. He has gray hair and long gray beard. He is a graduate of the Hahnemann College in Chicago, and the college of Physicians and Surgeons, in St. Louis. He has been a member of the Institute eighteen years, and for two years chairman of our bureau of obstetrics, and has been chairman of the state legislative committee. His name is C. G. Higbee, of St. Paul."

The former treasurer and secretaries were re-elected. The new board of censors consists of Dr. Rush, Dr. T. F. Smith, Dr. A. C. Coperthwaite and Dr. C. B. Kinyon. It was voted to hold elections hereafter on Wednesday instead of Thursday. It was decided to hold the next meeting at Waukesha, Wis.

ADVERTISEMENTS.

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In certain forms of dyspepsia it acts as a specific.

Dr. H. R. MERVILLE, Milwaukee, Wis., says: "I regard it as valuable in the treatment of gastric derangements affecting digestion."

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BEWARE OF SUBSTITUTES AND IMITATIONS.

General and Personal.

Dr. H. N. Keener is now located at St. Joseph, Mo.

Dr. Wm. Tod Helmuth sailed for Europe the middle of June.

D. A. McLaughlan, M. D., of Ann Arbor, is spending the summer in Europe.

Give ideas a chance to develop themselves, and we will all be the gainers by it.

Dr. Leonard Pratt will return to San Jose, Cal., about the first of October.

Aching, sore, wearing agonizing pain in the upper large end of the stomach.—Kali. 10d.—Dr. Hale.

The question is not, what were our great, great grand fathers, but what is becoming us.—*Russell*.

The northwest is prosperous because of the progress of medicine.—President St. Paul Chamber of Commerce.

The mortality of the Yellow Fever and Small-pox scourge in parts of Brazil is said to be sixty per cent.

Dr. S. B. Parsons and family of St. Louis, are enjoying their summer vacation in the wilds of Nebraska.

I stand among those who represent the most progressive system of medicine.—Prest. Minn. League, at the Institute banquet.

Just so long as we ape the old school in our study, just so long will we follow them in our therapeutic administrations.—Dr. Cowperthwaite.

Drs. Dowling and Obetz are always on the alert and never fail to get in a good word for their respective colleges when an opportunity offers itself.

They say that a batchellor is about as useful as the half of a pair of scissors.—*Medical Era*.

And this from you, brother Gatchell? we are surprised; we are, indeed.

If the motions of the tongue are an index to the patient's strength, appearances are very deceptive and most of our lady patients are very, very strong.

No. 1, Vol. 1, "*The New Remedies*," with James E. Gross, M. D., as editor, and Gross & Delbridge as publishers, made its appearance this month.

Dr. Albert Claypool after having caught all the fish out of the lakes of Minnetonka, now

wends his way towards Ashland, Wis., where he thinks he can find a summer's entertainment with the piscatorial rod.

Dr. M. B. Campbell, through political trickery of old school physicians, has been ousted from the position as physician in charge of the Joliet prison. We sympathize with the prisoners.

To Dr. Campbell:—Now come to Texas where you can enjoy man's birth-right,—(health).

Dr. Wm. Owens, Sr., of Cincinnati, Dr. C. E. Walton, formerly of Hamilton, Ohio, and Dr. Wm. Owens, Jr., have formed a co-partnership for the practice of medicine and surgery in Cincinnati. Dr. Walton will make a specialty of Surgery and the Diseases of Women.

The Western Exchange Bureau: Physicians, dentists' and druggists' locations bought and sold in all parts of the United States and Canada. Assistants, substitutes and partners furnished. Send two-cent stamp for the *Monthly Bulletin*. Sample copy of the *Medical News* free. Address H. A. Mumaw, M. D., Orrville, Ohio.

To Drs. Pratt, Gatchell, McKinney and Wales.—Gentlemen, for courtesies shown us, we are most respectfully yours. We were highly entertained at your hands and are very desirous of again partaking of your hospitality. In return we extend an invitation to you to visit Texas and promise you a right royal reception.

We are in receipt of the eleventh annual announcement of the College of the New York Ophthalmic Hospital. The advantages for clinical instruction in diseases of the eye and ear offered by the New York Ophthalmic Hospital are unsurpassed by any institution in the country. Over 12,000 persons are treated in the out-patient department each year, with an average attendance of over 200. In the large wards of the hospital department all the more serious diseases of the eye and ear receive attention, and the more important operations are performed. To all of which students are freely admitted, and every opportunity afforded them to study the cases and become familiar with the various forms of diseases and the methods of treatment. The course will commence Tuesday, October 1st, 1889, and continue six months.

Communications should be addressed to

CHAS. C. BOYLE, M. D.,
No. 167 W. 34th Street,
New York City.

Southern Journal of Homeopathy

NEW SERIES
NO. 7.

San Antonio, Texas, August, 1889.

OLD SERIES
NO. 69.

• • Editorial • •

Plain Talk.

TO THE PROFESSION OF THE SOUTH.

For fear some of you might forget it, we desire to call your attention to the fact that The Southern Homeopathic Association meets at Memphis early in November next. Now please remember this and do not come forward with the excuse that some one ought to have reminded you of it. Do not think of making an excuse for non-attendance but go to work right away and get your business in such shape that when the time comes to be there, that you can and will answer to roll call. It will cost money to be there did you say? Why to be sure it will but you can afford the investment. It will pay big. In truth you can't afford to stay away, for the returns are very large for the small out-go. You ask what is the use of your going there? What can I do? I will not be missed—others will be present to do what is to be done just as well without as with me." Did it ever occur to you that if we all think the same way and each depend upon the other or some one else to attend to those things for us, that no one would be there at all and as a result nothing would be accomplished. Every one has the same right to think this way, that you have, each of us have important private affairs to look after yet we can all arrange our business so we can absent ourselves for a few days in November, to transact business that concerns us all jointly and collectively as one great body. We do not go there for personal ends, and of that whole whose interest we are looking after, you are one, and you ought to be there to lend a helping hand. Brethren we have large interests

to be looked after and we want your ideas about how to get at things. Do not tell us you can not help, you can if you will. We have to look after the legislation of the country very closely. We want legislation in our favor. We want legislative recognition in the right direction, toward our good. But if we can't get that we want to defeat adverse law-making. We do not want laws that are going to do us damage. Just as sure as twice two are four, just so sure it is that the "regulars" will move all their engines against us, and by law oust us out of everything we have in the way of practice if we don't by a wise and united front oppose ourselves to them. You certainly know enough to understand that the self-interest of the old school practitioners leads them on to persecute us. We want your help because you are from a different locality from the rest of us. You can tell us what is the feeling down in your "neck of the woods." You can advise us what kind of legislation is necessary to carry your part of the country. In fact you can help us a great deal. Come and do it.

There are several states having state universities built and maintained by the taxes of the people. Does it not occur to you that quite a number of dollars of this money is collected from homeopathic people who know that homeopathy is the true healing principle, and who want their doctrine taught at their state schools which their money pays for, they think and honestly that their money is miss-applied, and want it turned into a different, and as they believe, a true channel, viz: The support of homeopathic teachings in such schools, at least so far as the pro-rata of taxes by them paid goes. Do you not think they are right? Think about it and then come to Memphis and tell us what conclusion you have come to, and what we had

better do about it. Talk to your people, take their advice and come and tell us what they say.

We would like to tell your patrons to be sure and see that you come for their good, for you will be sure to learn something if not a great deal that will be of much good to them. You will return home a better doctor than you were when you came. You will have more knowledge of the healing science. In fact you have no idea how much you will learn that will be of a lasting good to the community among whom you live and practice. We speak of this from personal knowledge and of the personal education derived from such intercourse. Be sure and be there. You will meet gentlemen, the highest in the profession. You will become acquainted with them, and you will be able to measure their ability, so that in the future should you need council you will from personal acquaintance know to whom to apply. And finally my brethren we have done our duty by you. Do you do yours by us? Be active and help us to win. Add to our number if nothing else. Let us show numerical strength and we will not only be respected, but we will be influential—for that which a politician will refuse to the few, he will not only grant but will work for, if asked for by a constituency having many votes at their back. In this we want your help, you will look and count as big as any one else.

Florida homeopaths in Council.

The State Homeopathic Medical Society of Florida met at the residence of Dr. H. R. Stout, Jacksonville, June 18, with Dr. P. E. Johnson, president, in the chair. Dr. H. R. Stout acted as secretary. After a general discussion of business pertaining to the society, an election of officers was held which resulted as follows: President, Dr. H. R. Stout of Jacksonville; vice-president, Dr. Ada F. Bruce of Tampa; secretary, Dr. C. W. Johnson of Jacksonville; board of censors, Drs. T. J. Williamson, Blanding and P. E. Johnson.

The second annual meeting of the society will be held at Tampa the second Tuesday in June, 1890. At night a fine banquet was tendered the members at Dr. Stout's residence.

• • Gynecology • •

Urethritis.

READ BEFORE THE AMERICAN INSTITUTE OF HOMEOPATHY, AT LAKE MINNETONKA, JUNE 28TH, 1889, BY MOSES T. RUNNELS, M. D., KANSAS CITY, MISSOURI.

Gonorrhoea in the female is not so typical and pronounced as in the male. In the latter the catarrhal processes are originated, as a rule, by gonorrhoea. When we discover an epididymitis or acute prostatitis or a purulent secretion from the urethra, we justifiably infer a gonorrhoeal origin. In the female we cannot proceed with as much certainty. Irregularities in the physiological functions of menstruation and pregnancy and general diseases may cause catarrhal affections of the genital organs, which in turn occasion, not infrequently, diseases of the uro-poetic system. The uterus and appendages may be affected by some of these conditions. The uro-genital tract is therefore not affected by gonorrhoea to such an extent in the female as in the male. We cannot, in the female depend altogether upon the microscope in deciding whether the disease is dependent upon a gonorrhoea. The gonococci are plentiful in the acute stage of gonorrhoea, but in the chronic form it is difficult to find. The acute stage is short, and the chronic stage is usually what the physician is called upon to treat. The modesty of women, even of the lower grades, and the fact that the gonorrhoeal disease is, in its acute stage, very mild in the female, are probably the chief reasons that medical men are not called upon to treat this disease in its inception. This accounts for the want of careful study by medical men of this disease in the female.

The primary gonorrhoeal diseases in the female are urethritis and vaginitis. These are followed immediately by other conditions which are very disastrous.

We may find the causes of urethritis either in the person affected, or they come from without. The urethral mucous membrane may be affected by hyperaemia, acute or chronic catarrh, ulceration or hypertrophy, when the urine contains for any length of time, (1) a super-abundance of salts, (2) ammonia, (3) fungi, (4) membranous threads from diphtheritis of the bladder, (5) blood clots.

A direct lesion of the mucous membrane is sometimes caused by passing a catheter, bougie or sound, or by the extrusion of calculi. Diseases of bladder and kidneys are pre-disposing causes of urethritis. Streubel has found urethritis as a complication of the scrofulous diathesis and with impetiginous skin eruptions. In scarlet fever and measles I have seen a specific urethritis set up. In two instances Scanzoni states that he had seen variolous pustules in the urethra in small-pox and he found more than twenty follicular ulcers in the urethra of a girl nineteen years old who died of measles.

Frequently in typhus, dysentery and puerperal septicaemia the urethra becomes greatly disturbed in its nutrition. Ulceration of carcinoma, lupus, syphilis, diphtheria, elephantiasis, or tuberculosis may invade the urethra from the labia minora and the introitus. The active and passive hyperaemia and mechanical displacement sometimes caused by pregnancy also affect the urethra. It may suffer a rupture or laceration in delivery, either with or without instruments. The peri-urethral plexus and the blood supply of the other pelvic organs are so closely related that displacements of the uterus, tumors of the pelvic organs, or inflammations of the same are great sources of irritation to the urethra. Diseases of the rectum, in one form or another, cause inflammations of the urethra of a serious character. A pre-existing urethral inflammation may often be aggravated by

menstruation. I have witnessed some very distressing inflammations of the urethra in young women after marriage, which were probably brought on by cohabitation.

The introduction of foreign bodies (masturbation), unclean specula, careless use of the finger, tents for dilatation of the canal, or wounds from falls, or blows, occasion inflammation of the urethra. Taking cold is a prolific cause of urethritis.

There seems to be but one opinion among recent specialists as to the frequency of gonorrhoeal urethritis. They generally agree that it is never absent in cases of recent infection.

Among the older writers, we find that Swediaur never observed a case of urethritis in the female; that Zeissl holds that there are only five cases of urethral gonorrhoea among one hundred cases of gonorrhoeal vaginitis; that Ricord believes that in contagious blennorrhoea of the female, the urethra is often affected alone; that Cheron states that in the female there is one acute urethritis to five chronic urethritides; that Suchanek found, in one hundred and sixty-six cases, the vagina and urethra both affected in one hundred and twenty-two, urethral gonorrhoea alone being present only in three cases; and that Winckel says that most frequently those affections occur conjointly with maladies of the vagina, and especially together with virulent vaginal catarrh.

It is generally agreed that the virulent urethritis feminae is usually secondary and is communicated from the mucous membrane of the introitus or the vagina.

Dr. Wm. H. Baker of Boston says that probably the great majority of cases of urethritis are of specific origin and secondary to gonorrhoeal infection of the vagina. Sigmund examined seven hundred and sixty-three cases of gonorrhoea in the female. In this number there were four hundred and seventy-six of

vaginitis and urethritis together; two hundred and eighty-two of vaginitis alone and five of uncomplicated urethritis.

Lewin found only eight cases of urethritis in two hundred and forty-two blennorrhagic women, and in six hundred and twelve pseudo-syphilitic women, eleven had urethral sores. Among prostitutes, we find blennorrhagic diseases common—at least two-thirds of the total number of infected cases can be classed as gonorrhoea. In four hundred and twenty-five blennorrhagic women, Hourmann found but one case of urethritis.

SYMPTOMATOLOGY.

Both the specific and the non-specific, the acute and the chronic forms of urethritis feminae have so many varying degrees that the diagnosis is not always easy to make. The acute specific form gives the diagnostician the least trouble. In health, the mucous membrane at the orifice of the external urethra is pale red in color. The color is changed to a rosy cherry, or brownish red in hyperaemic conditions; the mucosa becomes oedematous and the vagina is narrowed and warmer by thickening and inflammation. In the beginning, no increase of secretion is apparent; but later a light mucous or muco-purulent fluid comes from the meatus, which can be considerably increased for an instant by pressure from behind and forward on the urethra which is felt as a firm cord and is very tender. No discharge of this nature can be expressed from a healthy female urethra. The discharge shows on microscopical examination gonococci in the pus cells, the same as in man.

In virulent urethral gonorrhoea, after an incubation of two to five days, the woman first notices an itching in the urethra, soon to be followed by a prickling sensation with frequent micturition, attended with great pain and a sensation

of heat. In three or four days, a serous, glutinous secretion is found coming from the urethra, which is changed to a purulent and greenish discharge a week later; in about three weeks, this discharge begins to abate, and by the end of six weeks may wholly disappear. The inflammation may be so active as to cause a discharge of blood and a vesical catarrh. However, the short and straight course of the female urethra, and the absence of large glands renders it less liable to severe urethritis than in the male. The urethra in man is divided into two parts, but this is not so in woman. According to Finger, of Vienna, we find in the female bladder a true sphincter, consisting of smooth and striped muscular fibres, and constitutes a sharp boundary between the urethra and bladder." In man there is a neck of the bladder which at times belongs to the urethra and at times to the bladder. In woman, the urethra is about one and three eighths inches in length, on an average, and about one-fourth inch in diameter. It is open anteriorly and closed toward the bladder; so that regurgitation of urine or any of the secretions from the urethra into the bladder cannot easily occur. We know that the capacity of the female bladder is greater than in the male, but even when distended it holds all the urine perfectly.

When urethritis becomes chronic, the discharge from the urethra gradually diminishes, the inflammation subsides and the mucous membrane takes on a livid blue color. The urethra may be felt as a hard and infiltrated canal, not painful, and on pressure from behind forwards, a milky muco-pus may be seen at the orificium externum urethrae.

In order to form correct diagnoses of hyperemia and catarrhal or virulent urethritis, the mucosa of the vulva and surrounding parts are to be subjected to thorough examination by feeling and

seeing. The thickness, hardness and sensibility of the urethra should be determined by touch. The presence or absence of gonococci in the secretion from the urethra must be decided by the microscope. The existence of elastic fibres in the secretion, will be proof that urethral chancre is present. If the inguinal glands become involved and bubo appears we will be further aided in our diagnosis. Should "clap shreds" and cloudiness be found in the urine passed after thorough cleansing of the vulva, we may expect to find a chronic urethritis.

The follicles located around the female urethra may be involved in any blennorrhagic process of the canal and become swollen, sensitive and noduled. This condition may subside without further trouble or may run a very tedious course. Pus is often secreted and suppuration follows, or the pus may find an outlet into the urethra through small canals—one or more. The follicles at the orifice may undergo acute inflammation which may relapse and become chronic. This process is liable to result in supperation in the follicle affected. Other follicles around the urethra participate in the inflammation and so it may be protracted. Skene's glands may be affected by chronic inflammatory conditions of the vulva and urethra. Great tenderness will be found at the urethral orifice and when pressure is made against the anterior vaginal wall, just behind the meatus, a drop of pus from their mouths will escape when the glands have taken on catarrhal inflammation. An irritable bladder may be a prominent symptom; but this is also frequent in case of urethral carbuncle. So long as these glands remain in a catarrhal condition, the patient will have exacerbations of urethritis.

Acute urethritis may sometimes be mistaken for cystitis. In the latter the vesical tenesmus and the constitutional

effects are more pronounced, and the escape of pus can only be noticed at micturition, while in urethritis it escapes in the intervals.

It is well for the specialist to remember that in diagnosing gonorrhoea in the female, he should see with his nose and fingers as well as with his eyes.

The prognosis of urethritis in the female is usually more favorable than in the male. The chronic form is more easily treated, and the chances for recovery are, on account of the anatomy of the parts, considerably greater.

TREATMENT.

In acute urethritis accompanying vaginal gonorrhoea, or exposure to cold, or traumatism, a palliative treatment should be adopted. Hot vulvar and vaginal douches with warm sitz baths should constitute the local treatment at the outset.

We have learned more of the nature, course and pathology of gonorrhoea in the female than we knew a few years ago. We can make better diagnoses and our remedies are not so numerous or confusive. If the gonorrhoeal disease in the female is recognized in its inception and properly treated it is soon over. Hot vaginal irrigations increase reintegration and a mild antiseptic in the water, as boracic acid, sulphite of soda, or sulphocarbolate of soda, does much towards retarding the multiplication of gonococci. It is necessary that the parts should be kept cleansed. No injections of the urethra are allowable until the inflammation of the urethra becomes sub-acute. It takes usually a week or ten days for this to occur. Injections of the urethra are at no time so useful as in the male, because the female urethra is short and will not retain fluid so well. When the acute stage has somewhat subsided, there is no doubt but that the injection of hot water—as hot as the patient can bear—several times daily, by the use of Skenes'

reflux catheter, does a great deal towards effecting a speedy cure. The old school treatment by the use of injections of hyper-magnate of potash, sulphate of zinc, alum, tannin, etc., and the local application of tincture of iodine, or a solution of nitrate of silver, or carbolic acid, or fine point of a Paquelin Cautey are expedients which no homeopathic physician should ever resort to.

When the cause of the inflammation is known, we may begin treatment by removing it if possible. Rest, abstinence from intercourse, cool mucilaginous drinks and soft foods with no stimulants, tea or coffee, should be ordered. Much depends upon keeping the diet healthful and restricted and the mind free from excitement. The hygienic treatment with rest in the recumbent posture will surely cure many cases of specific urethritis feminae. Two to four vaginal injections of hot water should be taken in the recumbent posture each day.

No internal remedy is so generally indicated in the beginning as Aconite in the lower attenuations. It does very much towards relieving the irritation, pain and burning, and is useful until these symptoms have somewhat subsided. The symptoms I have found to call for Aconite most are as follows:

Nervous excitability.

Acute inflammation of the urethra.

Vagina hot and sensitive.

Urine scanty, red and burning.

Painful, anxious, urging to urinate.

Great burning distress in the urethra when urinating.

Cannabis sativa has not served me so well as Aconite in the acute and specific forms of urethritis. It is indicated when the discharge becomes purulent and yellow, with burning and smarting while urinating. In doses of five to ten drops of the tincture, this remedy has done most service for me. I have used it in all at-

tenuations and have come to the conclusion that the remedy is prescribed too frequently and very often empirically.

Cantharis, which is so frequently indicated in cystitis, is also a valuable remedy in urethritis when symptoms of the kidneys and bladder appear as follows:

Gonorrhoeal discharge of mucus and purulent matter from the urethra.

Desire to pass urine almost constantly.

Burning and scalding pains in the urethra.

Intolerable tenesmus.

Dull aching pains in the regions of the kidneys.

Burning and cutting pains from the kidneys down either ureter to the bladder.

These symptoms may be accompanied by haematuria. I get the best results from Cantharis in attenuations above the third decimal dilution.

Mercurius solubilis and *corrosivus* are very reliable remedies when the discharge becomes green and purulent and is worse at night. Extreme cases of violent tenesmus, burning and swelling of the urethra, require mercurious *corrosivus*. The Allopathic physicians are using this drug as a specific for gonorrhoea. Great burning between micturition is an indication for *mercurius solubilis*.

In old and oft repeated cases of gonorrhoeal urethritis I have found *Thuja* of great value when symptoms as follows occur:

Sycotic excrescences, or whitish ulcers on the labia which are swollen.

Urethral discharge thin and green.

Mucous leucorrhoea.

Desire to urinate almost constantly.

Can pass but a few drops of bloody urine at a time with a great deal of smarting and itching.

Walking produces stinging, itching and smarting pain, with contractive and pressing pain in the genitals.

Sepia is another remedy of great use in

chronic urethritis, especially of a specific origin. The micturition is more frequent at night and is attended by burning pains. Vulva and vagina are both painful to touch and dry; milky or yellow leucorrhoea with considerable itching of the genital organs.

Bloody discharges from the urethra when walking.

No discharge from the urethra except at night when a few drops appear staining the linen yellowish.

There are special indications for other remedies in urethritis too numerous to mention. Some of the most prominent of these remedies are *Equisetum hyemale*, *Petroselinum*, *Clematis erecta*, *Conium*, *Capsicum*, *Copaiva*, *Cubeba*, *Argentum nitricum*, *Pulsatilla*, *Belladonna*, *Nux vomica* and *Berberis vulgaris*.

If Skene's glands become diseased by the gonorrhoeal process, they should be "slit up along their urethral aspect by means of a pair of fine pointed scissors."

Sub-acute catarrh is usually due to irritation or impeded circulation and disappears as soon as the cause is removed, but a urethritis dependent upon gonorrhoeal infection may sometimes linger for months and be complicated with cystitis.

In chronic cases of urethritis where the walls of the urethra are very much thickened and the canal narrowed, dilatation with steel sound is recommended. The sound is not to be introduced oftener than once or twice per week. The metallic sound should be used whenever a stricture of the urethra is found. Sometimes the urethra is so contracted and surrounded by cicatricial tissue forming bands, that it is much distorted and very tender. The smallest sounds may be admitted with difficulty.

The specialist needs to be on the lookout for vesico-urethral fissure in all protracted and very obstinate cases of urethritis and cystitis. An examination of the

urine will be sufficient to decide whether the latter is present and the endoscope will enable the diagnostician to exclude urethritis and detect vesico-urethral fissure. This fissure or ulcer is usually developed from urethritis. Dilatation of the urethra by means of steel sounds is the remedy for this very aggravating trouble. If dilatation fails to cure the vesico-urethral fissure, then Emmet's buttonhole operation should be made to establish a vesico-vaginal fistula. Skene says "the fistula may be allowed to close of its own accord, as it usually will do. By the time the fistula closes, the fissure will have healed."

In acute or chronic urethritis it is very important that the portal circulation should be kept in a normal condition by securing a healthy action of the liver and bowels. If a good general circulation can be maintained the local affection will not be so severe. I have found mineral waters (notably the Waukesha, Wisconsin, the Saratoga, and the Excelsior, Clay Co., Missouri), of great benefit in the treatment of urethritis and cystitis. By the use of one of these waters the action of the kidneys is increased and the urine is rendered less acid and irritating. The bowels are more easily moved each day and the homeopathic remedies are more effective.

OUR stately contemporary, *The American Homeopathist*, takes up *The New York Medical Times* matter and devotes considerable space to some very sound remarks on the subject which has been so long under discussion. We would like to ask the editors of *The Times* if their journal is "a Homeopathic" publication? If it is, then its place is in the American Institute of Homeopathy; if it is not, its place is outside the American Institute of Homeopathy. This is the only possible ground consistent with self-respect.

• • Eye and Ear • •

Corneal Ulcers and Their Treatment.

READ BEFORE THE TEXAS HOMEOPATHIC ASSOCIATION BY H. F. FISHER, M. D., AUSTIN, TEXAS, 1889

The Cornea forms the anterior one-sixth of the eyeball, and having a smaller radius of curvature than the sclerotic, projects forward beyond the general curvature of the other portion of the globe. It is a perfectly transparent, tough tissue, circular in shape and varying in thickness from one-sixteenth of an inch at its junction with the sclera, to one twenty-fifth of an inch at its centre. Being tough it can sustain considerable direct pressure without injury.

Irregularity in the curvature of the cornea causes astigmatism, which interferes with the comfort of the patient, often giving rise to violent headaches and gastric disturbances; dimness of the cornea interferes with the vision and if the dimness proceeds to opacity, and this opacity is extensive, it may cause entire loss of vision.

As a thorough knowledge of the anatomy of the cornea is requisite for the comprehensive treatment of injuries to, and diseases of this tissue, we desire to call your attention to the following description:

The cornea is protected from external influences by the lids, which keep foreign bodies from impinging upon it. The lids are lined by the conjunctiva, which is reflected onto the eyeball and extends up to the junction of the cornea with the sclerotic. The lubrication is furnished by the lacrymal apparatus.

There are five layers or lamellae, in the cornea, and from without inwards are as follows: Epithelial, Bowman's (or anterior elastic), and Endothelial.

The Epithelial layer is continuous with the conjunctiva, is very thin and formed of a superficial squamous stratum, lying upon a middle layer of dentated cells, and these resting upon a layer of clubshaped cylindrical cells.

Bowman's layer lies immediately behind the epithelial and is composed of a cement containing fibrillae and fosciculi; it is slightly more refragent than the balance of the cornea and gradually merges into the parenchyma.

The Parenchyma, or substance proper of the cornea, consists of very fine fibrillae united into fosciculi; of a cement which binds the fibrillae and the fosciculi together; of a system of canals, which represent a continuation of the lymphatic vessels and spaces; and last of cells which line these lamnae and canals and ramify throughout the whole cornea. The fibrillae and fosciculi are arranged in layers, one above another, and are more adherent in the horizontal than in the vertical plane. The cement is a homogenous substance, binding together intimately the fibrillae and fosciculi and contributes to the plate-like structure of the tissue. The canals traverse the cornea in every direction and contain the nutritive substance, lymph and cells, which is always maintained at certain pressure, ensuring the transparency of the cornea.

Descemet's membrane is the inner lining to the true corneal substance and is considered to be a structureless, homogenous membrane, of glossy appearance, and is highly refractive, firm, brittle, very elastic, and resembles Bowman's membrane. It is just above the Endothelium.

The Endothelium is the last layer in the corneal tissue and forms the external limiting substance to the aqueous chamber; it is composed of a single layer of round or angular cells and in some cases the cells are cuboid in shape.

In the normal state the cornea is not supplied with blood vessels, except at the extreme periphery and these vessels come from the anterior ciliary arteries, the nutrition of the cornea being carried on by osmosis. The nervous supply is derived from the ciliary nerves, of which forty to fifty branches penetrate the tissue and form large plexuses under the epithelium and in the parenchyma.

It is not my intention to consider all the affections of the cornea, but I desire to call your attention to some of the most frequent diseases of that delicate and important structure, and therefore will consider only ulcers of the cornea and their homeopathic treatment.

Ulcers of the Cornea are divided as follows, into the *Reabsorptive*, *Asthenic*, *Stenic*, *Serpentine*, *Crescentic* and *Serpiginous* [varieties, the last three often being included in the term *Infecting* or *Rodent* ulcer.

The *Reabsorptive* ulcer appears in the centre of the cornea as a small depression (often discoverable only by oblique focal illumination) with smooth, rounded, non-vascular borders, and is usually perfectly transparent, causing defective vision. It is most frequently seen in children. *Symptoms*: photophobia and lachrymation, but little or no pain. *Prognosis*: questionable as the disease is very slow, often lasting for months, and the ulcer may remain stationary and never heal, by causing irregular astigmatism they are injurious to vision. *Local Treatment*: warm applications, compress bandage, and if there is any vascularity apply an ointment of Calomel gr. ij. to iv, or Yellow Oxide of Mercury gr. ij. to iv, ad vaseline zss., and give indicated remedy.

The *Asthenic* (or non-inflammatory) ulcer appears suddenly, usually on the centre of the cornea, and resembles the reabsorptive ulcer but there is a greater danger of perforation. The edges of the

asthenic ulcer are ragged and irregular; the ulcer is of great depth, which may be deceptive, owing to the bulging of Descemet's membrane through the base of the ulcer near to, even with or slightly above the surface of the surrounding tissue. *Symptoms*: photophobia and lachrymation, interference with vision and in some cases pain. *Prognosis*: generally good, but the ulcer may remain good for months, then the edges may become vascular and formation of new corneal tissue ensue more or less completely, but not completely enough to restore the normal curvature, and vision is always more or less defective. It appears in adults and both eyes may be attacked simultaneously. *Treatment*: Eserine every two or four hours, and if there is bulging of Descemet's membrane, paracentesis; warm applications and compress bandage; in some cases local irritants will cause repair; give indicated remedy.

The *Stenic* (or inflammatory) ulcer is distinguished by its inflammatory character and the appearance of its edges (which are ragged and circular, sometimes irregular) and base, more than by the symptoms of irritation. The inflammation spreads rapidly from the ulcer to the surrounding parts, causing an irritation of the iris, resulting in synechia and hypopion. It is generally of a traumatic origin. *Symptoms*: pain, lachrymation (hot tears gush out on opening the lids), intense photophobia, the eye rolls upward upon opening the lids, redness of the conjunctiva and sub-conjunctiva, peri-corneal injection, loss of substance of cornea, the tissue around the ulcer is roughened, more or less opaque and saturated with pus, edges are ragged and circular but sometimes irregular, haziness of the cornea due to infiltration of pus, ciliary neuralgia, sometime keratocele and hypopion, one or more minute blood vessels running from the periphery of the cornea to the

ulcer. In some cases all the symptoms except the redness of the conjunctiva and sub-conjunctiva and dimness of vision are absent. The pain is due to exposure of nerve filaments. *Prognosis*: good unless case has progressed to perforation, and also dependent upon location of the ulcer. The course is generally rapid but at times very slow, in the latter case resisting all treatment until perforation results and then repair rapidly ensues. *Treatment*: Atropine if the ulcer is near the centre, and Eserine if it is near the periphery of the cornea, remove the cause, place the patient in a dark room where there is plenty of fresh air, tonics and nutritious diet, compress bandage, paracentesis if there is danger of perforation, or if there is considerable pus in the anterior chamber perform a Seamisch's operation, and give the indicated remedy.

The *Infecting (or rodent)* ulcers are divided into the *Serpentine*, *Crescentic* and *Serpiginous*, because of their shape and location.

The *Serpentine* ulcer is distinguished by its serpent-like shape, intractability and stubbornness, and persistent tendency to destruction of the tissue and perforation. It usually begins at the edge, although it may begin in the centre of, eats into and across the cornea; the base appears grayish or yellowish and the edges mottled, streaked or glazed, and there may be an appearance of sloughing, which may actually take place if the ulcer extends rapidly, caused by the interference with the nutrition of the cornea. The course may be rapid, the ulcer extending across the cornea from one side to the other in two or three days, and it may in this case cause the sloughing of the tissue; but very often they are extremely slow and in these cases repair may set in and destruction may progress, the two conditions existing at the same time. If a large perforation occurs during the existence of

the ulcer, allowing the pus to escape, the healing process will be rapid. *Symptoms* grayish or yellowish appearance at the base, mottled or streaked appearance of the edges, muddy appearance of Descemet's membrane and refractive errors, and in early but not in later stages, pain, photophobia and rachrymation.

The *Crescentic* ulcer differs from the serpentine ulcer in its shape, extending around the periphery, in some cases completely, in a moon-shape and it has two or three points or foci which unite to form the ulcer, and if perforation occurs it usually does so at one or more of these foci. If the ulcer is very long it will cause sloughing of the tissue. *Symptoms*: same as in the *Serpentine* variety.

The *Serpiginous* ulcer is not as deep as the *Serpentine* and *Crescentic* ulcer, only involving the superficial layers of the cornea, and usually extends across a portion of, but may extend in a circle around, the cornea and is not so liable to perforate as the others are.

These *Infectious (or rodent)* ulcers, *Serpentine*, *Crescentic* and *Serpiginous* varieties, are seldom found in persons under forty years of age, and most frequently occur in the poorer classes where, from lack of cleanliness, decomposed materials get into the eye. In the better classes it is caused by inflammation of the lachrymal sac, the pus becoming decomposed. The infectious ulcers always attack transparent portions of the cornea and will eat entirely around an old cicatrix, while ulcers that are not infectious will attack a cicatrix or healthy transparent tissue. *Symptoms*: are those given under the *Serpentine* variety. *Prognosis*: very guarded, and bad as far as astigmatism is taken into consideration, and in the rapidly extending ulcer. *Prognosis* should always be unfavorable. *Treatment*: Atropine if the ulcer is central, Eserine if it is peripheral; if hypopion exists and shows

tendency to increase, lay open the whole base of the ulcer from sound tissue on one end to sound tissue on the other, and allow the pus to escape; extreme cleanliness, carbolized water to cleanse the eye, and the compress bandage, using at the time the indicated remedy internally.

HOMEOPATHIC REMEDIES USED IN CORNEAL ULCERATIONS.

Aconite : superficial ulceration of the cornea resulting from traumatism; first stages of ulceration caused by exposure in the open air, conjunctiva red, sometimes chemosed; photophobia and lachrymation; or most often the eye is dry, hot, burning, very sensitive to air; patient restless, thirsty and feverish.

Apis : ulcers of the cornea, which are often vascular; photophobia and lachrymation; burning, stinging pains, sometimes shooting through the eye; lids oedematous and swollen; thirstlessness and drowsiness.

Argentum nit : ulceration of the cornea in new-born infants, or in cases of purulent ophthalmia, with profuse discharge from the eyes; halo around the light, with darting pains through the eye morning and evening; pains better in cool open air and aggravated in a warm room; lids generally red, thick and swollen; conjunctiva chemosed; the discharge is profuse and whitish yellow.

Arnica : ulcers (caused by traumatism) with hypaemia (or blood in the anterior chamber).

Arsenicum : chiefly in superficial ulcerations occurring in scrofulous, anaemic, restless children; ulcer has a tendency to recur first in one eye then in the other; excessive photophobia; hot, burning, acrid and profuse lachrymation; burning, sticking twitching pains in the eyes, worse at night, especially after midnight; cold water aggravates, warm water may relieve; eyeball sore to the touch; con-

junctiva red, sometimes chemosed; lids swollen externally, and very sore internally, spasmodically closed and often excoriated by the discharges.

Asafetida : ulcers accompanied by iritic pains, which extend from within outward relieved by rest and pressure.

Aurum : ulcer of the cornea occurring during pannus and ophthalmia in scrofulous subjects; cornea quite vascular; patient irritable and sensitive to noise; photophobia; lachrymation profuse and scalding; eyes sensitive to touch; pains extend from without inwards and worse from touch.

Calcaria carb : corneal ulcers in fat, unhealthy children, who sweat profusely, especially about the head and are susceptible to cold air; deep ulcers in weak cachectic individuals; the pain, redness, lachrymation and photophobia are variable; remedy selected by the concomitant symptoms; if there is enlargement of the glands, cervical and faucial, the iodide of eolearea is to be preferred.

Cantharis : ulcers caused by burns, with burning pain and lachrymation.

Chininum mur : ulcers of malarial origin or in anaemic conditions, especially if the iris becomes affected; severe pains in or above the eye, periodic in character, and accompanied by chills; ulcers with pannus with excessive pain in the morning.

Cinnabaris : variable pains above the eye extending from the internal to the external canthus, or running around the eye; photophobia and lachrymation.

Conium mac : very important when the surface only of the cornea is ulcerated; intense photophobia and much lachrymation; lids spasmodically closed and tears gush out upon opening them; discharge slight; variable pain; little or no redness of conjunctiva; strumous habit; enlarged glands.

Euphrasia : ulceration in earliest stage; photophobia ; profuse acrid, burning lachrymation, with profuse acrid yellowish-white, muco-purulent discharge from the eyes ; blurring of the eyes relieved by winking ; conjunctiva red ; eyes smart and burn.

Graphites : ulcers in scrofulous children who have eczematous eruptions in the head and behind the ears, eruptions moist, fissured and gluey : superficial ulcers from pustules ; deep ulcers with hypopion ; cornea vascular and conjunctiva injected more or less ; intense photophobia ; profuse lachrymation ; variable pains ; discharges thin ; edges of lids very red or covered with scales ; cracking and bleeding of the external canthi ; acrid discharge from the nose.

Hepar sulph : one of the best remedies in ulcer of the cornea, especially for deep sloughing ulcers with hypopion ; ulcer rapid in growth ; intense photophobia ; profuse lachrymation ; great redness of cornea and conjunctiva ; chemosis ; severe trobbing, aching, stinging pains, better from warmth, worse from cold or from uncovering the eye ; eye very sensitive to the touch ; lids swollen, red, spasmodically closed, bleeding easily upon opening them. For hypopion *Hepar sulph* is the best remedy ; strumous habit and very cross children.

Kali bichromic : indolent ulcer, with no active inflammatory process ; no photophobia nor redness ; pains slight and variable ; discharge stringy.

Mercurials : the *Mercurius sol.* is valuable in superficial and deep ulcers, especially in syphilitic or strumous subjects ; cornea at the ulceration is vascular, may be surrounded with a grayish opacity ; marked redness of the conjunctiva ; great dread of light, especially at night ; profuse, burning, excoriating lachrymation ; discharge thin and acrid ; pains variable, often severe, always worse at night and

in extreme cold weather, better temporarily from cold water ; lids thick, red, swollen, and excoriated, sensitive to contact, cold, and heat (if extreme) and forcibly closed ; pain at night, etc.

Mercurius cor : the preceding symptoms are more severe and iris complicates the corneal affection.

Mercurius nit : in ulcers of all kinds, with all kinds of symptoms, but especially if there is a tendency to the formation of pustules ; used empirically.

Mercurius præc rub : ulcer of the cornea is covered with pannus ; granular lids ; other symptoms of mercury.

Mercurius protiod : in serpiginous ulcers beginning at the margin extending over the whole, or a portion of the cornea, especially the upper part, involving only the superficial layers occurring in cases of trachoma and pannus ; great vascularity of the conjunctiva and cornea, and excessive photophobia ; thick yellow coating at the base of the tongue.

Natrum umr : ulcers appearing after use of caustics ; child lies with head buried in the pillow to relieve the excessive photophobia ; acrid lachrymation ; thin excoriating discharge ; lids swollen ; variable pains, often sharp and piercing, above the eye when looking down ; shining eruption around the eye on the face.

Nux vomica : superficial ulceration of the cornea with excessive photophobia in the morning, better during the day ; injection varies, as does also the pain ; profuse lachrymation ; neuro-paralytic affections of the cornea ; in cases overdosed with medicines.

Pulsatilla : superficial ulcers following phlyctenules ; thick, white or yellow, bland discharge ; symptoms ameliorated in the open air ; mild temperament.

Rhus Tox : Superficial ulceration ; excessive photophobia and lachrymation ; tears gush out on opening the lids which

are spasmodically closed ; superficial ulceration with granular lids ; profuse flow of tears ; redness of the eye ; conjunctiva chemosed ; lids, especially the upper, oedematously swollen ; vesicular eruption around the eye ; symptoms worse in damp weather and at night after midnight ; rheumatic diathesis.

Silicia : chronic ulcer with hypopion ; small round ulcers which tend to perforate ; very sensitive to cold.

Sulphur : chronic ulcer with hypopion ; sharp, sticking, needle-like pains in, or sharp, shooting pains through the eye into the head, from one to three o'clock, A. M. ; intolerance of light ; profuse lachrymation ; all symptoms aggravated by bathing ; scrofulous subjects.

Dr. John H. Henry's Answer

TO JUDGE GEO. C. BARRETT'S LETTER, PUBLISHED IN THE NEW YORK "MEDICAL TIMES," IN MARCH 11TH, 1889, ON RESTRICTING HOMEOPATHIC PHYSICIANS TO SMALL DOSES AND SINGLE REMEDIES.

While many opponents of homeopathy admit the truth of the law of similia in practice, they denounce the doctrines of homeopathy as a tissue of absurdities ; they tell us and our patrons a belief in homeopathy means small doses and single remedies, and they call on a learned judge of the supreme court of New York to help them sustain the truth of this statement.

He writes : "If I call in a medical man who designates himself a "homeopathic physician," it is because I don't wish to be treated allopathically or eclectically or other than homeopathically. For there is an implied understanding, between myself and the homeopathist that I shall receive the treatment which by tradition and general consensus of opinion means small doses of a single drug administered upon the principle of "similia, similibus,

curantur." In the discussion of the liberty of homeopathic physicians in the practice of medicine, I will ask the judge if there is perfection in any science ? If there is not, have not homeopathic physicians a right to labor and make changes which will perfect the science and practice of homeopathy in healing the sick ? As homeopathy is a new science, not quite one hundred years old, will he please have charity to learn. It could not be expected in so short a time all the ground in practical medicine could be explored by it, as up to this very moment, June 24th, twelve (12) o'clock, 1889, the cardinal problem of dose in therapeutics is unsolved, and as much as all schools of medical practice have labored for it and desired its solution, little do they know about it to satisfy them even approximately. Now the honorable judge must admit the dose problem is one of conditions, which separates old medicines from homeopathy, based on the law of similia, forming a wide and deep gulf between them, which he helps to deepen and widen by his letter, which may be filled up in the next thousand years. And the honorable judge will please excuse me for volunteering to inform him. Old medicine, which he attempts to prop by legal opinions, and medical legislation has not a writer in all its vast heap of medical literature who has formulated or given any plan, ways or means of satisfying this want of determining the dose in therapeutics according to any natural laws.— And if he will examine the *Materia Medica* of old medicine which he is called on through the *New York Medical Times* for help he will find old medicine never troubles itself to study in accordance with any great leading principles which would help them discover such laws. They know Croton Oil and Tart. Emetic will create pustules, and Opium will act as an anodyne, from tradition, and from this they

form an opinion and seek to investigate the kind of pustule and anodyne or mentions them as incidentals, but they cannot tell how it comes and what is to be done with them, telling us tradition teaches such are the ones possible and we must stick to them. We hope the judge will see in the twilight of the thick darkness of the fog which ever spreads and covers up the *Materia Medica* of old medicine. The light of the lamp of *similia* breaking through the fog and thick darkness—for there is a class of progressive physicians, among them the most distinguished are Scudder, Bartholow, Ringer, Phillips and Murrell, who are using small doses which they know must act according to *similia*. They are of great value to homeopathy in helping to develop a therapeutics recognizing the importance of using drugs proved on the healthy system, but acknowledging no general relation between drug action, allowing the truth of many medicines acting in contrary directions in large and small doses, and they prescribe these remedies in different doses in order to avail themselves of these contrary actions, often giving as small doses as many homeopathic physicians. This class may be called rational or empirical physicians or old school doctors, as compared with homeopathy, which the judge would help choke to death. This class of physicians are more successful in curing diseases for they are hunting up and gathering up all the gold nuggets of the homeopathic *Materia Medica*, like Aconite, Belladonna Arsenic, Copper, Nux vomica, Pulsatilla and many other diamonds of homeopathy, and place them in the crown which adorns the head of old medicine. With the work of these wise and industrious, toiling brothers of old medicine and eclecticism, let me inform the judge, he nor no class legislation can restrict or confine the practice of homeopathy in the narrow compass of small doses and single reme-

dies. But let us be free to add our block of *similia* in the healing monument, looking for a bright morn in the future.

When all schools of practice will with the homeopaths accept the law of *Similia* as the only natural law of healing, as we grope our way with caution and care hunting up and unearthing from the medical rubbish of past experience of all schools of practice, the pearls and diamonds of curative medicine we will fix them in the crown of *similia* which adorns the head of homeopathy. For we confidently believe no disease can be permanently cured without the application of this law in the prescription and the cure will come if it is in the 30th dilutum or in a compound of one pound containing twenty remedies. The law of *similia* must be true in the smallest of doses as well as in the largest or in single or compound remedies, if it is true in one, it must be true in all or it cannot be called a universal, natural and scientific law of healing and unless I believed this, I would have no faith in homeopathy and drug provings.

Having this faith let us not stray away from the bearing of our compass *similia* and wander hopelessly and lose ourselves as the judge would like to see us in the filthy compounds and jumbles of old school experience and nastiness. But we must stand by and on our land marks of symptoms the proving of all our drugs on the healthy system the only lodestone *similia* which is unerring and true in extracting the poison of disease and restoring to health. The judge writes a homeopathic physician, has no right to adopt other than homeopathic measures in the treatment of disease. I would only call the attention of the judge to his position by asking this question.

What is the aim of all science? The aim of all science must be directed to this in the place of the contingent to set up

that which law makes necessary for the two predicates must connect all science with all things. As this assumption is not the head of all branches of medical science and art is one of the wonders of the 19th century. For the more we study the medical theories of the present day of old medicine, they are found most opposed to any other school of medicine having any rights before the law and the judge has stepped down from his high legal position to help old medicine in this assumed position.

If he will study the sciences elementary to therapeutics, physiology, pathology and chemistry he will find a great number of accidental observations collected and proved to be correct by the art of experiment which is practiced or partly rejected, and many of those cast aside as worthless are taken up by some bold searcher after truth and brought into use again; and he must know this uncertainty is contingent and characteristic of all empirical knowledge and doubtless he has learned the purely empiric-co-experimental knowledge of old medical therapeutics can be nothing more than accidental, resting on no law or principle which must make it uncertain and doubtful and without much value in helping to cure disease. But the law of similia resting on the art of drug-symptoms, observation and perception which is so highly cultivated by the homeopathic physicians, coupled with the art of experiment which gives them confidence in providing the means of cure which results from the casualties of chemical practice eliminated from every experience based on drug proving.

When we read the journal of old medicine published in all parts of our common county, the judge will please be informed of the many new experiments made without any connection as to the discovery of a scientific natural law of cure, but only for an excuse demanded by this enlight-

ened and progressive age. And the last effort is the judges attack on homeopathy, in the New York Medical Times. I would like for him to tell us after this fulmination or bull of his against homeopathy—what has old medicine done not to be excused of, by the demand of these enlightened days? How about the days when Hydrate of Chloral and Bromide of Potassium made its thousands of idiots? What about the deranged sots of Cocaine? And now the blue devils of antipyrin. As homeopathic physicians, we use all these new medicines in small doses and they are a blessing to mankind but we never make sots and lunatics of our patients by their use.

Should not these symbols of mental derangement and lunatic asylums and suicides teach the judge and the public the presentage of old medicine must throw the past into utter darkness, when we know the doctor thinks of nothing but palliatives hypnotism and sleeping the sick to death.

We thank the honorable judge for telling us we have no right to use these death sleeping medicines in large doses. But we now inform him the object, aim and teachings of the homeopathic school of medicine is to use, hold fast, hang on and take on all curative remedies and useful things which the past and present of all schools of medicine have found to be curative remedies in disease. For in the law of similia we find and behold all the curative remedies of the present and future and we don't want empirical facts but well weighed, appreciated facts, according to the eternal laws of nature in existence made secure for all time. And all facts not judged by this standard are worthless to all science. We labor and investigate that we may take the uncertain from the event and determine what has taken place and in this we labor to master that of uncertainty which often

renders our judgement doubtful, as the formation of correct judgement is often prevented by obstacles thrown in our face, which rests alone on accident or individual knowledge, as our old school brothers are inclined to the subjective side of therapeutics. We must free ourselves of all subjective opinions and deal with facts and study the laws of nature which govern these facts. The connecting of facts with a conclusion drawn therefrom is not always in the arbitrary will of the subject forming it, but in the laws which are in accord with events which necessarily had to occur as they did occur and must occur in all time to come.

But with the judge to help old medicine crush homeopathy, a union of feeling in accepting the law of similia as the true and only law of therapeutics will never come without a greater struggle, for the masses of old school doctors are void of independence and they have no fixed principles, but stand by and stick to their blind leaders. They fear medical ostracism; they have no time to study and comprehend any other school of practical medicine; they are full of egotism, easily flattered and more quickly offended, and are always in favor of any and all things that are opposed to homeopathy; and are unwilling to have a conviction of its truth or falsity, for they and the judge well know conviction must come from reflection and feeling, but the domain and object of knowledge is nature. In natural sciences we have nothing to do with belief, and conviction but with knowledge, so belief and conviction in all questions of natural science must be void and has no scientific value so long as the reason for it is not found in the objective of the subject considered. If perception and deduction form the sources of our knowledge, we must find out which knowledge is the subject of perception and which deduction, preventing many errors, re-

quiring great intellectual work. Our old school brothers stick to and hang to the Lake Superior story of its taking all the waters in a hundred lakes, like it to make the 30th dilution of Aconite, and all the land in the United States and more, to make the 30th trituration of Arsenicum. And they tell the people a cure by any homeopathic remedy or of the 3rd or 30th is incomprehensible and utterly impossible and at other times they tell them all homeopathic remedies are stronger than theirs and most deadly poisons; then with all their misrepresentations with their fixed preconceived opinions they bring to bear prejudice which closes their eyes and ears against all facts backed by cures which are opposed to their set opinions, let them be ever so true and striking, and owing to this unchangeable prejudice in regard to truth which cannot be disputed, but having once formed a contrary opinion, all attempts to change them fails, for they will not even make an experiment which might lead them to accept the truth of homeopathy for fear they might become convinced, which would help in the approach of a settlement of the dispute which the judge helps to keep alive with all the popular fallacies which have been and are still used as weapons against the practice of homeopathy with the doctors, the learned and unlearned. It is to be hoped the judge and all he attempts to prejudice against the theory and practice of homeopathy will begin to study it and see in a mirror on their intellectual weakness and no longer remain in the company and class of those who are ignorant, for he well knows in the forum of science no other explanation or excuse can be given for his and their lamentable ignorance, misconception for helping to ag on the persecution of homeopathy, but attribute to them a blind abandonment to prejudice and error. Because homeopathy has been rejected generally by the old

school profession, it is no proof the doctors and the judges know more than the people. For this among the doctors has not always sprung up from the barren soil of learned men but from the hard-working every-day practical physicians who are the most zealous and bigoted partisans of old medicine. If these wise doctors and judges are called to account for their fight against homeopathy, they tell us there is a great lack of evidence in favor of the truth of homeopathy and that of similia and they cannot accept its truth. In this the judge and his wise doctors must see and know from the lack of evidence they are but placed in a state of doubt in which he or they can give no opinion worth considering and the result of their opinion can only be, I don't know, but it is not so, and when homeopathic physicians tell them homeopathy don't mean small doses, and a belief in the law of similia as the only the only true law of healing has nothing to do with its truth in the prescribing of small, single or compound remedies. But this logical and bold manner of discussing the truth of homeopathy and the application of the law of similia is evidently new, strange and startling to the judge and opponents of a system of practice which he attempts to prop by legal opinions marked by monopoly and class legislation, helping to disgrace the profession of old medicine as well as the science and art by helping to keep up a bitter strife, injuring more than those in the profession, disturbing, unsettling and influencing the most important domestic and social interest in society. It was to be hoped before the judge dipped his pen in human venom and wrote his choking, strangling bull against homeopathy he would have felt the influence of the good efforts which marked the action of the legislatures of New York, Florida and Pennsylvania which is intended to help bring the strife between medical

schools of practice to an honorable settlement. For by their legislative action each tub of healing must sink or swim in the river of disease by its own want of success.

As the judge has based his argument against homeopathy on small doses he will please learn from standard authority what is meant by the words homeopathy and similia. Worcester in his dictionary wrote, the word homeopathy means likeness of conditions, like any suffering. "The art of curing founded on resemblance or by inducing similar diseases." The doctrine of Hahnemann that diseases are cured by medicines which have power to cause similar diseases in healthy persons." Or, the doctrine that similia, similibus curantur, "like is cured by like." And the same authority, similia means, "like, resembling, having resemblance." Webster in his dictionary writes, homeopathy; "likeness of conditions or feelings; the art of curing, founded on resemblance; [the theory and its practice that disease is cured by remedies which produce on a healthy person effects similar to the symptoms of the complaint under which the patient suffers, the remedies being administered in minute doses." The word similia, anything likened in one of its effects to another; a similitude; exactly corresponding; resembling closely; precisely like." Then the meaning of the word allopathy: "The employment of medicines in order to produce effects different from those resulting from disease; opposite to similia of homeopathy." Allopathic: "Pertaining to allopathy. the ordinary mode of medical practice."—(Webster.) Allopathy: "The art of curing by inducing symptoms different from those of the primary disease; the ordinary medical practice. "Allopathic: "pertaining to allopathy, or the ordinary method of medical practice.—Doctor: To practice physic; to treat with

medicines, to physic, to cure, to heal. A physician: One whose business is to cure disease; one who practices medicine.— Doctor: Any able or licensed man, an adept.—(Worcester.) Doctor: One qualified to teach, a teacher, a learned man, one skilled in a profession or branch of knowledge, a savau; doctor, to practice physic; doctor, to attend, to treat as a physician, to apply remedies, as to doctor the sick, a sick man —Webster.

Where does the judge find his authority for confining the homeopathic doctor to small doses?

In 1790 the principle of similia was discovered by Hahnemann, not quite one hundred years ago, in the power of Peruvian bark to produce symptoms of chills and fever, and small doses did not produce it or cure it, but large doses produced it and cured it. As to the doses Hahnemann gave up to 1799. they were large; in 1800 we have a hint of small doses. He first called his system of practice, the Doctrine of Specifics, and from 1796 to 1808 he employed almost exclusively the word Specific, but later we meet with the word Homeopathy, but as specific homeopathy or homeopathic specifics, and even in his edition of the origin section 147 he writes, the homeopathic remedy is the specific for the cure of disease. We find him in 1797 giving 4 gr. doses veratrum, of Ipecac, 5 gr. doses, Submuriate of Antimony and Sulphate Copper, $\frac{1}{4}$ gr. doses, Nux vomica, 4 gr. doses. In 1798, we find him giving same doses as the old school doctors. He gave to children Ignatia, from nine months to three years, $\frac{1}{2}$ to $\frac{3}{4}$ gr. at a dose; from four to six years, 1 to $1\frac{1}{2}$ grs.; from seven to twelve years old, 2 to 3 gr. doses; adults, 8 grs. dose. Opium, 1-5 gr. to a child five years old, to adults $\frac{1}{2}$ gr. doses. Gum Camphor to adults in doses of 15 to 20 grs. at a dose, but if necessary, he gave it in doses of 30 to 40 grs., to children twelve

years old, he gave 15 grs. a day for two weeks. Ledum pal., he gave in doses of 6 to 7 grs. Peruvian bark, he gave zjss. doses. In 1801, he gave small doses in the 3d dilution. Such were the first infinitesimal doses mentioned and used by Hahnemann. In 1808-9, he gave Nux vomica 9th dilution, and Arsenic, 18th dilution. In 1815, he gave drop doses of the juice of Bryonia, and 12th dilution of Pulsatilla. In 1819, he gave the 6th trit. of Gold. In 1820, he gave Gold 1st and 2nd. In 1825, he gave the 12th dilution. As late as 1827, his doses were very varied. He did not show a constant tendency to diminish the dose, but he occasionally went back to material quantities, guided by experience and the character of the disease and the medicine. Thus in 1814 we find him giving Bryonia 15th attenuation, and in 1815 giving the same medicine in pure tincture. In 1819 he gives Aurum 1st trit. In 1827, Stannum, 3rd. In 1826 he gave it in the 6th. It is evident up to 1827 he had no fixed standard for the dose. The judge will please learn Hahnemann did not always have a fixed standard of dose or dilution, for in his last Organon, he writes approvingly of the 60th, 150th and 300th dilution, and still, later in 1837, he writes in his "Chronic Diseases:" "We should repeat the medicine descending from the 30th to the 34th dilution." Shortly before his death he gave Sulphur and Mercurious as low as the 2nd trit. Doctor Chapman says the contents of Hahnemann's pocket case shortly before his death, contained medicines ranging from 3rd to 30th, showing up to the last period of his life, he used all dilutions to cure the sick. After the judge learns how often Hahnemann changed his views and practice respecting the dose, and that the largest majority of his early followers with three fourths of the homeopathic physicians of this day use doses to suit condi-

tions, he must see the question of dose as it was with Hahnemann, is of minor importance compared with the choice of the remedy.

Dr. C. J. Rane, in his *Special Pathology and Therapeutic Hints*, writes, "this book does not give any prescription in regard to the dose, because this is still an open question and must be left entirely to the free judgment of the practitioner."

Dr. Bache, in his *Science of Homeopathic Therapeutics*, volume 1, page 41, writes, "the question of dose is a purely practical question." Page 42, "daily experience points to the fact that the size of the dose depends upon the peculiar character of the pathological process. Dr. G. Ludwig Raie, writes in his *Organon of the Homeopathic Specific Healing Art*, page 178, section 105, "the magnitude of the dose is a subject of great importance; opinions under this head differ a good deal; the followers of every school have made it a rule to determine the magnitude of the dose by the irritability and reactive power of the organism."

Dr. Fielitz advises to regulate the dose according to the susceptibility of the organism. Dr. Backhausen is of the same opinion. Dr. Werber expresses himself very clearly, thus: "Every disease requires a proportionate quantity of medicinal action, in order that the organism should not be excited too violently or too feebly." Doctors Hinks and Rumel write, "the dose is an open question, but should be graduating."

Charles J. Hempel, M. D., in *Organism of Specific Homeopathy*, page 83, "The size of the dose has been a bone of contention among homeopathic physicians. As a general rule it is safe to employ the lower dilutions and attenuations in some diseases and in others the middle and lower."

Dr. J. W. Arnold writes, in a period of ten years he has never found it necessary

to go above the 6th decimal dilution, but he has often been obliged to give the specific remedy in strong doses, as several drops [of the pure tincture, or a quarter or even several grains of the original preparation.

Dr. F. Hartmann gave 3i doses of Peruvian bark in typhoid cases, and gave Quinine in gr. doses in intermittent fevers and Sulphur in gr. doses.

Dr. J. O. Muller says: "There is no constant, universal, absolute dose for all medicines, just as there is no one constant character for all individuals," and he would exclude entirely from homeopathic posology extremely high potencies.

Dr. Kampher writes, "the homeopathic law refers only to the selection of the medicine," and throws no light on the quantity in which it ought to be given.

Dr. Whale is true to his maxim, to employ all doses from 30th down to the undiluted tinctures.

Dr. Hebig says the contention about dose is absurd; he uses high or low doses and in some cases homeopathic medicines requires to be administered in even larger doses than what are even employed in the old practice.

Dr. Vehsemizer says, "lower conditions are preferable in every case."

These quotations will suffice to convince the judge that homeopathic physicians are left as free as any other doctors to give what doses and kind of medicines they please to cure the sick. For as there is, and can be no normal doses for all diseases, and for all patients; for doctors differ vastly among themselves in respect of power, diseases in point of intensity, and patients in point of susceptibility from medical impressions. Now the judge must see how false and untenable his position is in attempting to limit the homeopathic physician to small doses and single remedies. For in the meaning of the words homeopathy, allopathy, doctor of

the law of similia, he can find no warrant for the assumption ; for the above points must be attended to in choosing the dose in any given case of disease, and he will see, we as well as other schools of practice are unsettled as to the suitable doses for the different circumstances for which this or that remedy is indicated. And as it is the experience of the most learned and practical physicians of homeopathy, material doses or low dilutions are best and the homeopathic system made greater progress under the name specific practice of homeopathy and large doses, than it has since under the high potency craze of Jenichis, Fincke, Jahu and Böninghausen who were not educated physicians or M. Ds., but took up the practice ; the two latter names are to be honored by homeopaths all over the world, for their great literary learning ; works on practice have made it easy to find the indicated remedy and no homeopathic physician should be without them although they do not agree with them as to doses.

It must be clear to the judge that old school medicine has no law to govern the dose, nor no other school, yet he helps old medicine attack homeopathy with fury of persecution in the strife for a bit of knowledge he must know don't exist in one school or the other ; and the question is not whether the dose of the old school doctors use is the proper one, based on the strength of tradition and faith in authority, or upon the basis of a subjective problematical approximation ; on the contrary the question is not in this strife. And it is not for the judge to determine whether it is the custom of one set of doctors or the other is to be accepted or not. It remains for science to handle this strife and it is a matter of indifference. As the sole and simple question of dose or what amount of medicine or substance, regardless of all subjective connections and incomprehensibilities is necessary in order

to induce that chemical or physical counter motion, in any diseased portion of the organism, which is equal in intensity and opposite in direction to that which is induced by the morbid cause, in order to check the latter forthwith or at least to delay it and then by repetition to remove it. The homeopathic doctors have from the time of Hahnemann to the present fought for and insisted upon the purity rather than the amount of medicine used to cure. And the law of similia, recognizing the physiological and symptomatic double method of drug action on the healthy and diseased system makes the selection of the remedies more easy and simple and Hahnemann has taught when the specific action of a remedy is once proved curative in certain symptom of disease, it will be so for all time, and the name of disease has nothing to do with the cure and choice of the remedy or doses.

For in the law of similia we have the truth of homeopathic practice in a nutshell that "like cures like, or like causes produce like effects." And as homeopathy teaches the action of drugs, we use them to cure, though never recommended before. For instance, Copper produces cholera, and it will cure forty-five cases out of fifty ; this is specific homeopathy. Our law of similia is of universal action ; it knows no hap-hazard in curative medicine, and we know nothing about the uncertainty and curiosities of therapeutics.

We note with care all the symptoms of disease and compare them with the symptoms of the medicines. And we have nothing to do with the single remedies, small doses or compound remedies to prove the truth of similia or practice of homeopathy ; and the learned judge has no law to stand on when he attempts to confine homeopathic physicians to small doses and single remedies, as he don't profess to know much about the functions of the body and the action of medicines

denoting the relationship between the symptoms governing the choice of the remedy and its cure of disease.

While the law of similia belongs to homeopathy, the law of contraria belongs to old medicine. Neither of these laws recognize any dose, and cures are made by medicines that seem to act directly opposite, curing disease because their action is opposite to disease; they are opposed to diseased action and change diseased functions, bringing it back to a healthy standard. As large doses of Iodide Potassium and Ginseng are the only two remedies in the homeopathic *Materia Medica* that have all the marked symptoms of chronic rheumatism.

They are the only two remedies to cure chronic rheumatism and they will cure it, it matters not how long standing for in this form of disease they are the remedies to cure according to the law of similia but they must be given in larger doses than old medicine would use them, proving the universality of the law of similia in the application of the remedy to the cure of diseases. Now judge, if in name and law of similia and the code of ethics of the American Institute of Homeopathy we find small doses not mentioned, and they don't mean small doses and single remedies, where do you find your authority but in consensus of opinion for attempting to confine the homeopathic physician to small doses and single remedies? Does consensus of opinion make it right to keep open whiskey shops on Sunday? Or is it right because consensus of opinion permits the heathen mother to throw her child to the open jaws of the crocodile? By no means. Your reasoning would make every homeopathic physician nothing more nor less than an automaton.

Then as we find no scientific ground in authority and law for the judges consensus position, let all homeopathic physicians by a more careful and accurate

research asserted by the lights of modern physiology and new remedies make a wide opening for the reception of the truths and chemical experience found in all medical schools which will give us a more successful cure of the sick. Remembering, "where great prejudices prevail there we may expect that error exists and the judge with the school of medicine, which asks his help as a strangler of homeopathy. I would address the words of Locke: "Those who have not thoroughly examined to the bottom all their own tenets must confess they are unfit to prescribe to others and are unreasonable in imposing that as truth on other men's belief which they themselves have not searched into, nor weighed the arguments of probability on which they should receive or reject it."

JOHN H. HENRY, M. D.

Surgical Therapeutics.

BY R. E. M'INTYRE, M. D., TOPEKA, KANSAS.—
READ BEFORE THE KANSAS STATE SOCIETY
MEETING, AT EMPORIA, KANSAS, MAY 2, 1889.

It has been said that "man is the creature of circumstances." This is true only within certain limits. Man is the creature of education largely, whatever the source of this education; whether the book of Holy Writ or the homeopathic *Materia Medica*; whether the yellow backed novel or the almanac, the allopathic *Materia Medica* or the swine from which the prodigal learned his condition. The life work of all is largely the result of education, whether this be good, bad or only partial.

If a man be a murderer, robber or gambler, it is because of a faulty education in the large majority of cases. If he be a useful member of society, this also is the result of his early training. So we find that in professional life, men are apt to cling very tenaciously to what they have been taught. The time was, and even

now we hear the idea of a homeopathic surgeon ridiculed by many who claim a reasonable amount of intelligence. This is the result of the lack of knowledge, as to all the necessary knowledge of a surgeon. "But," say some, "is not the operative work of both schools alike?" Yes, but the difference is in the constitutional treatment. It has been said he who aspires to be a great surgeon has set his mark high. This is true, and he who is able to diagnose a case requiring any major operation and successfully perform the same should certainly be recognized as possessing rare ability; but he who by constitutional treatment prevents such a necessity has attained greater glory.—Hence it is not the most successful operator who is always the best surgeon.

Valentine Mott, we are told, once felt compelled to apologise to his class because of being obliged to perform a surgical operation from want of therapeutic knowledge. It was once believed that certain conditions, now known to be amenable to our therapeutic methods, would always require operative interference. And even now the list is large enough, yet we can feel some pride in the fact that homeopathy has increased the number of curable surgical diseases greatly over that of a generation gone.

A girl of fifteen years came to me from out of town for treatment for ulcers on her ankles. On the one she had received a slight scratch which resulted in an ulcer and finally several appeared. For the other she could give no cause. On questioning her I ascertained that she had taken cold while visiting some month before, resulting in amenorrhoea. Her skin and conjunctiva of a deep yellow color, tongue coated and flabby, appetite gone, etc.; Puls. being pretty well indicated; she received it in the third dilution. I applied locally, Dr. Hall's tar plaster, and asked her to report in a week, which she did,

the menses having appeared normally. I now gave her Sil. 6x. Her skin began to clear up and the ulcers took on healthy action and were all healed but two, and they were in a perfectly healthy condition within four weeks from date of first prescription. I treated the patient and not the disease.

I find by referring to the article Ulcers, by B. F. Curtis, M. D., in the Reference Hand Book, almost five pages devoted to the local treatment of ulcers, and only twenty-three lines to constitutional treatment, the last sentence of which is as follows: "In fact in most cases of chronic ulcer little or nothing definite can be found to show what the predisposing cause of ulceration may be, and no constitutional treatment is indicated beyond hygienic directions, a tonic or an occasional laxative."

By reference to Hamilton, we find his treatment for cases of non-union after fracture, consisting principally of local measures, with so-called tonics, etc. I may be permitted to quote from our own Gilchrist in this connection. "If we conceive disease to be of purely mechanical origin, nothing but mechanical means can be applied for its removal. If chemical, chemical antidotes must be employed. If due to the implantation of specific germs or spores, agents to destroy them must be demanded. If produced by vital changes first functional, then organic, proper medicinal agents may be used." I would amend this last to read, *must* be used, instead of *may* be. He says in another place, "It must be conceded that this mysterious vital principle is at the bottom of disease as it is of health, and any disturbance thereof will result in permanent or transient functional irregularity, depending upon the nature and extent of the disturbing influences, the susceptibility, and hygienic surroundings of the individual. If the nervous system is the centre

of life, it is very easy to conceive that mental impressions play a most important part in the production of functional aberrations." And we can easily see how prolonged functional irregularities may result in permanent structural change.

If the above quotation be true, and no one will for a moment doubt that they are, then we can only find one explanation for the little importance placed on constitutional therapeutics in many surgical diseases, by the allopathic authorities. They are the victims of a false or only partial surgical education. They do as well as they know how, nor will their blind prejudices permit them to learn better. May I not be permitted here to enter a word of warning, lest some in our own ranks leave the more glorious plan of constitutional treatment of the cause for the easier, but less important, of cutting out the effect and leaving the cause still in full force?

Comparing, we find that while Dr. Curtis allots twenty-three lines to therapeutics and five pages to local measures for ulcers, Dr. J. G. Gilchrist forbids all local treatment except for cleanliness (which I believe to be too sweeping), and gives the indications for sixty-eight remedies to remove the cause. This shows the distinction between a homeopathic and an allopathic surgeon pretty clearly.

He is a better surgeon who can prescribe the indicated remedy to remove all predisposition to benign tumors than he who idly sits and sees it form and then successfully removes it.

It has been the tendency in all our society meetings to describe some major operation, leaving the more important and only feature that elevates the homeopathic above the allopathic surgeon, (therapeutics) to go by default. This shall be my apology for occupying your time with this brief paper.

Subscribe for the Southern Journal.

Pterygium, Its Origin, Growth, Treatment and Results.

BY M. JAY BROWN, M. D., SALINA, KANSAS.
READ BEFORE THE KANSAS STATE HOMEOPATHIC MEDICAL SOCIETY, EMPORIA, KANSAS, MAY 2, 1889.

The term Pterygium, we understand, indicates an excrescence of the conjunctiva. Its character is so definite that when once seen you cannot well mistake it.

It is triangular in shape, the apex of which extends into the corneal tissue.

There may be one or more on the same eye, seldom but one, and more frequently found at the inner canthus.

Alt says, "the formation of pterygium of the conjunctiva may be caused by a marginal ulcer of the cornea. This happens in the following way: The marginal ulcer causes infiltration and swelling of the adjacent parts of the conjunctiva, a fold of which comes into contact with the corneal ulcer and gradually becomes adherent to its walls and bottom. That this may be really the case, was proven in a case, by the fact that Bowman's layer was severed from the periphery of the corneal tissue and bent backward upon itself, furthermore, I found the conjunctival epithelium incarcerated between the conjunctival tissue of the pterygium and the ground of the corneal ulcer, and in a state of colloid degeneration.

The whole of the tissue of the pterygium which grows like a wedge into the corneal tissue, is merely unaltered conjunctiva." "Pterygium, as stated above, may originate in a marginal ulcer of the cornea, combined with blephorrhoeic conjunctivitis. I have, however, learned by clinical observation that it may just as well be caused by catarrhal conjunctivitis (especially in the acute form, without the existence of an ulcer."

In this western country where we have a great deal of wind and dust at certain

seasons of the year, this class of ocular disease is much more frequent than in the central and eastern states. From my observation here during the past five years I have concluded that its origin is due in the majority of cases to injuries sustained by the cornea-margin, by small foreign bodies becoming imbedded therein and the influence of the severe winds to which we are sometimes exposed. Undue exposure undoubtedly is often the cause of catarrhal conjunctivitis, after which, Pterygium sometimes follows.

The site of this growth being found more frequently at the inner canthus, is due perhaps to the anatomical relations of the eye. In the first place, there is here a larger portion of the conjunctiva exposed, and the natural tendency of the lachrymal fluids to move in this direction, as well as the action of closing the lids to drive out all mucus, dust, or whatever irritating substance may have lodged upon the eye, is the cause of a great amount of irritation, and whenever the continuity of the corneal epithelium is broken, an ulcer is established. The perverted or catarrhal discharge from the conjunctiva will be a constant means of retarding the healing process.

From the fact that this particular growth is so frequently met with, and so often passed over by the profession at large as a matter of little importance, is why I have chosen this subject. Our leading text books say but little about it perhaps, for the reason that ordinarily there is but little danger in operating if done carefully as it is, by the better class of surgeons; another reason is, that the finer operations done by them are almost sure to overshadow the lesser ones, and in writing, the details and emphasis is lost from sheer lack of interest.

Of the real improvement in vision following successful measures, nothing is said. The experience that many have

had in operating, is such that would discourage others consequently we find physicians who advise their patients not to have it removed, but rather take the chance of it doing no harm. There can no harm come from clean work, but much good aside from the removal of its unsightly appearance. The improvement in vision is often great. This improvement can only be appreciated by those who have suffered the annoyance, and more especially those who have passed the meridian of life. To these the gain is surprising, and most satisfactory. This does not apply only to the cases where the growth has extended to the center of the cornea, but as well to those of smaller.

The treatment of pterygium should be placed under two heads, remedial and surgical.

Under the first we would place those cases which are of recent origin and perhaps owe their existence to a sub-acute or chronic catarrhal conjunctivitis, also those produced quite recently by injuries of the cornea margin.

In these cases we will of necessity find but a small portion of the growth extending into the corneal tissue, and if the patient be healthy otherwise, the topical application of a solution of one of the following remedies may be all that is required if continued for a few weeks.

Among the remedies for local use which have been proven most useful are, arg't nit Boric ac, Phenic ac, Tannic ac, Merc nit, Hydrastis and white Pinus Canadensis.

In patients of a strumous habit, or where there are disordered conditions of the digestive system, it is well to correct this by the properly indicated remedy, and restrictions to the best hygienic relations.

The dependence placed in systemic treatment for this trouble, is not yet what

we might wish, yet we may reach it as we learn more of the resources from which we have to draw. Our materia medica is full of good clear cut indications for remedies to cover individual cases where they have grown worse from exposure to the elements or other local causes.

The following remedies however, are claimed to have given best results. Argent nit, Arsen alb, Calc carb, Chimaphila, Cannabis, Psor, Ratan, Spig, Sulphur and Zincum.

In case a remedy is administered, it is chosen on the same principle that we would prescribe in any other given case.

The result at best can be only to allay the inflammation for the time being, any exciting cause will again produce the same stimulus to renewed growth. When these means fail, operative measures are then order.

The second class includes those of the first where success does not attend the treatment, and all those of long standing especially where the encroachment upon the cornea is extensive.

In this as in all operative procedures about the eye, strict cleanliness is recommended. If there is much irritation of the palpebral mucous surface, I would first reduce it by some one of the above named remedies. Should there be Trachoma granulosa, or Follicular conjunctivitis, this must first be cured before you can expect any good results from the operation. All complications so far as possible should be removed. When this is done, you will be ready to operate with prospects of good results.

The technique of this operation in itself is very simple. However, to secure the best results, it must be thoroughly done. Here I have nothing new to offer, further than to emphasize the necessity of clean work. Most failures in surgical practice are due to haggling, ragged, slovenly

and uncertain character of work done.— Unless a follower of Hahnemann can make a clean cut, as he prescribes, he should not attempt to do the work of a surgeon. Pure homeopathy demands the best of everything, and progressive Kansas is not slow to recognize the fact.

I will describe my manner of operating as best I can, which is as follows: After cleansing the eye well with some recognized antiseptic solution, if an adult, you will then instil a four per cent. solution of cocaine at intervals of three to five minutes until the conjunctiva is well anesthetized. Placing the patient in the recumbent position, you will now introduce the speculum by which the lids are well separated and the globe sufficiently fixed. Now seize the growth with a small forceps near the border at a point just over the cornea-margin. Stretch the tissue by drawing directly away from the globe, and with a small scalpel dissect the tissue up close upon the healthy surface on both sides, well up to the apex. Now move the forceps back far enough to grasp the tissue toward the base, raise it slightly, and dissect back to the base on both sides. This being done, now cut clean the apex from the cornea, and as it is being turned back, see that all the tissue and blood vessels are raised and removed from the bottom all the way back to its base. Cleanly done, and by this I mean that all the abnormal growth be removed, all that remains to be done is to sever a portion of the loose tissue, leaving a short stump to contract or slough away as the healing process progresses. In case the pterygium was large, it will be necessary to insert one or two stitches. Then apply a compress saturated with non-alcoholic calendula, diluted one part to five of pure water, and keep moist with this solution until the third or fourth day, when the stitches should be removed, and the patient instructed to bathe the eye occasionally with the same solution until the wound is healed. Where this policy is carried out in full, the best results are obtained.

News and Comment.

Our highly esteemed contemporary, *The Medical Era*, takes us to task for what it calls a mis-statement of facts in reference to the tariff restrictions on *Quinine*. We are seeking truth, and only truth, and it gives us pleasure to correct our statement so far as it may lead our readers to believe that Powers & Weightman are *now* operating a German laboratory for the purpose of supplying American consumers. *The Era* might have asked the firm named if they *ever* owned or operated foreign works. They have evidently sold out their German interests, which were acquired after the destruction of their Philadelphia works by fire some years ago.

The logic of *The Era's* position is this: That purity of drugs is insured by high taxation. This position is ludicrous enough, heaven knows, but it may bring out our point a little clearer to ask this question. If *Quinine* were selling at \$15 an ounce, and not a grain tainted by contact with foreign labor, "cheap" or otherwise, would the temptation to adulterate it not be very much greater than it is to-day, when the drug sells for less than one dollar? Do rascals generally counterfit the cheap things of earth? We beg to remind *The Era* that taxation increases the cost of an article; that the increase is paid by the consumer; and that the system of *fining* those who import drugs is directly for the benefit of the small class who manufacture them in this country. We also remind our contemporary that we prefer Adam Smith and Dr. Wayland as authorities on political economy to the congressman named by our critic. In conclusion, we regret the faulty proof-reading which came near making our error as great as that of *The Era* when it spelled Dr. Stearns' name as ordinary people spell *Stevens*.

* * *

It is pleasing to record the fact that our position on medical education is cordially endorsed by Dr. O. S. Runnels, of Indianapolis, one of the most enlightened and progressive practitioners in our school.— In his report as chairman of the Bureau of Medical Education, at the late meeting of the American Institute of Homeopathy he uttered some truths which ought to set the profession to thinking about some radical measure of reform. Both schools are at fault, and instead of one setting the other an example of good conduct, they have run a shameful race for a position in every way deserving the contempt of mankind.

* * *

In the current issue of *The Century Magazine*, Dr. S. Weir Mitchell exposes his ignorance in a fashion thoroughly characteristic of allopathic physicians. In an article on "The Poison of Serpents," he says: "Chava's belief in the value of volatile salt of the ashes of calcined vipers as a remedy for viper bite is an instructive exhibition of a form of medical idiocy not without modern illustration."

Dr. Mitchell may have imagined the above to be a telling thrust at Homeopathy; but he was dreadfully mistaken. Homeopathy has done some exceedingly foolish things, but it has never yet been convicted of any piece of idiocy approaching that exhibited by Dr. Mitchell. It is to be expected of illiterate practitioners (of whom there are legions), that they will continue to confound HOMEOPATHY with ISOPATHY until the end of time; but for a polished gentleman and a trained *litterateur* like Dr. S. Weir Mitchell to stumble and fall over such an obstruction is almost inexplicable.

This leads us to remark that it seems absolutely impossible for an old school critic to say anything truthful about Homeopathy. "Campaign lying" is done

with unblushing affrontery, and stereotyped misrepresentation has become so common that we generally pass it in silence. It appears exceedingly strange that men who claim to be engaged in scientific investigation cannot recognize truths which are so well established that to doubt them is to discredit the intelligence of the dissenter. Homeopathy is not Isopathy; is not "little pills;" is not "idiocy" of any sort or kind. It is a great truth, which has won the heads and the hearts of millions, and which is sure to grow in utility as the waves of time roll over it.

* * *

We should like to ask *The Eclectic Medical Journal*, of Cincinnati, by what authority it calls *Gelsemium* "one of our remedies?" The Eclectics are a long way in advance of the "Regulars," by whom they are cordially hated, but our progressive friends will pardon us for reminding them that they have won the large share of public confidence which they now enjoy by following the lines of treatment laid down by the founder of the Homeopathic school.

* * *

We have been asked if the growth of Homeopathy in the South is keeping step with the material progress of that section. We unhesitatingly reply in the negative, because no system of culture has ever traveled so fast as the cruder implements of civilization. Homeopathy thrives upon enlightened public opinion; enlightened public opinion comes from study and reflection; these form wealth and opportunity, which are based upon the solid rock of agricultural and mechanical greatness.

* * *

The removal of Dr. M. B. Campbell from his position as physician to the Illinois Penitentiary, at Joliet, forms a con-

spicuous illustration of the beauties of "practical politics." During his long service at the prison hospital, Dr. Campbell's energy and efficiency were never questioned, but his "place" was needed by some party boss, the result being that an accomplished and faithful servant of the state is retired to private life at a time when his services are more valuable than ever before. One might suppose that our elections are conducted exclusively in the interests of the swarm of hungry politicians who infest our public institutions.

* * *

To a careful of the daily press the fact is plain as sunlight that the medical profession is weighted down with child-murderers. The cities are teeming with those who live by killing, and the rural districts are by no means free from the vampires who suck the life-current of the innocents. Almost every day some girl dies from the effects of "an operation" performed for the destruction of foetal life. Hundreds of cases are found out and exposed by the press, but tens of thousands are not. But, bad as this is, it is not so bad as the sentiment of the profession which upholds abortion. Isolated cases always call forth savage rebuke, of course, but let an epidemic of exposures break out, and the profession closes ranks, plants artillery, and prepares a vigorous defense for those who are caught in the infamous practice. As an illustration of this, one has only to recall the crusade of a Chicago newspaper last winter. The idea of a respectable medical society containing members who are known as notorious criminals.

* * *

Speaking of the moral tone of the profession, we cannot pass in silence the action of the South Carolina Medical Society in expelling the murderer of Captain F. W. Dawson from its ranks. The as-

sassin, whose name shall not defile this paragraph, was cleared by a jury under the forms of the law, but the evidence which came from his own lips convicted him of being a scoundrel of the first water. He had attempted, and partially succeeded in, the seduction of an innocent defenceless girl, and with the *sang froid* of a villain, long schooled in crime, defended his conduct on the ground that his victim was "only a servant." We believe it was New York city which a few years ago produced a creature who made a living by robbing children in the tenement house districts of money given them by their parents for the purchase of bread. The secular press was furious; the religious papers were horrified, and straightway the robber was branded as the meanest criminal of all times and ages. But why should that scoundrel receive the anathemas of mankind? His victims were, according to the Charleston murderer's theory, only the weak, half-fed children of the slums.

* * *

The appointment of Prof. J. M. Crawford, A. M., M. D., of Pulte Medical College, Cincinnati, to be Consul General of the United States, at St. Petersburg, is especially gratifying to a large number of men and women in all parts of the country. Prof. Crawford is a trained and earnest thinker, a ripe scholar, a chaste writer, and above all, a pure minded gentleman of broad culture and large heart, who is sure to honor alike his country and himself in the conspicuous post assigned him by President Harrison.

* * *

As we pen these lines we are reminded that THE SOUTHERN JOURNAL OF HOMEOPATHY has passed its fourth birth-day. It has had several "ups" and a good many "downs," but it lives and grows, and is withal a fairly good-looking maid-

en to-day. It is the solitary representative of a great school of medicine in a vast section of the Union, and, whatever its shortcomings, whatever its obstacles, it speaks for truth first, last, and always. The principles which it advocates, the facts which it presents from time to time, will live in history when the vaunted pretensions of its adversaries are blasted by the keen, just edge of the scythe of remorseless Time. We are neither afraid nor ashamed of the principles of Homeopathy, and, during the long, dark night which must precede the break of a day glorious for humanity, our voice shall be heard proclaiming eternal truths in the trackless wilderness of bigotry and empiricism.

SIMILIA.

Cillium Tigrinum.

SOME VERIFICATIONS AND CURES BY S. A. NEW-HALL, NEWTON, KANSAS, READ BEFORE THE KANSAS STATE HOM. MED. SOCIETY AT EMPORIA, KANSAS, MAY 2, 1889.

CASE 1. Prolapsed right ovary, and subinvolution of uterus after severe labor, in a primipara.

Lillium 10 was given, resulting in a severe aggravation third day. Dull pain in forehead and over the eyes. Substituted

Lillium 20, with renewed aggravation; suspended the remedy and gave

Lillium 60, resulting in the relief of all aggravation, and gradual cure of case in about 40 days.

CASE 2. Prolapsus Uteri, with ovarian and pelvic congestion.

Mind: Depression of spirits, apprehension of serious trouble or that she would never get well.

Head: Dull pain in forehead, and eyes.

Abdomen: Distension of abdomen, dragging down of whole abdominal viscera, extending to chest, must support the abdomen.

Stool and anus: Pressure in rectum, smarting, burning pain in anus, constipation.

Pelvic Viscera: Bearing down pain in pelvis, and lower part of abdomen worse when standing. Prolapsus uteri with bearing down sensation accompanied with palpitation of the heart and severe neuralgia of the ovaries.

Chest and Heart: Dull pressing pain in region of the heart, with a feeling of a load or weight on the chest. She was given

Lillium 40, with prompt and rapid improvement.

This is a young lady aged 18, single, very amiable disposition very susceptible to the action of medicine. Always responds quickly to the appropriate remedy.

CASE 3. Young lady single. Prolapsus uteri. Severe pain in back from bearing on her feet. Pain in forehead and eyes severe.

Improving rapidly under *Lillium 10*.

CASE 4. Married lady, age about 40. Enlargement of uterus, with endo-metritis and cervicitis.

Mind. Depression of spirits, inclination to weep, timid, apprehensiveness.

Head: Severe heavy pain in head and eyes.

Heart and Chest: Palpitation of the heart with timid fear, (of nothing in particular.)

Generalities: Weak, trembling, nervous, throbbing in blood vessels of limbs; aggravation at night.

Amelioration during day having the mind occupied. Highly nervous temperament. *Relieved, Lillium 60.*

Pulte Medical College of Cincinnati, issues her eighteenth annual announcement—session of 1889—90 begins September 18th, 1889, and ends March 11th, 1890. For further particulars address Chas. E. Walton, M. D., Registrar, Seventh and John Sts., Cincinnati, Ohio.

For the JOURNAL.

Orificial Surgery,

BY MILTON J. BLIEM, M. D., SAN ANTONIO, TEX.

Though barely four years old, the new specialty of orificial surgery is already quite mature. It can hardly be said to have had any infancy, for it sprang forth from the prolific brain of its author full-armed into the arena, a veritable young giant to slay the enemies of good health. And yet on nearer acquaintance we recognize in the component parts of his armor many familiar weapons. In fact, Dr. Pratt has in a masterly manner generalized into one statement many facts known before. It is the application of the facts in a new manner that has originated a new specialty. I do not know that his first proposition has yet been or ever will be successfully assailed, namely, "In all pathological conditions, surgical or medical which linger persistently in spite of all efforts at removal, * * * * * there will invariably be found more or less irritation of the rectum, or the orifices of the sexual system, or of both" (orificial surgery, Pratt, p. 14). An impulsive corollary, though not a logical one, would be that therefore the removal of the irritations would cure the case. Experience now wide and by no means limited to the author has shown conclusively that recovery does, in fact so often follow measures directed to these orificial irritations as to make it well worth while to resort to them in all cases resisting other efforts.

But Pratt is not the man to lie contentedly on his sofa and generalize other men's facts into philosophical statements. To his honor and the benefit of the sick everywhere be it said that he has added a large array of new facts to this specialty. Not only has he pointed out well known pathological conditions in new relations to disease, but he has also called attention to others neglected or unknown and has devised new methods and means of treatment. Brilliantly above all others stands his discovery of rectal pockets and papillae; I say *discovery* advisedly, for their existence was absolutely unknown to him at the time; he has ever been more eager to push on into the promising future than to linger over the musty past. We may safely assert as well, that their existence and relation to disease were equally unknown to the vast majority of the profession until his published statements excited research into the records

of the past. Though opinion is still divided as to their being pathological or anatomical structures, the fact remains that in most cases of chronic ill-health they exist in an eroded and highly irritable condition and are then certainly pathological factors.

Orificial surgery, then, teaches that many cases of persistent and apparently incurable diseases are simply reflex manifestations of irritations localized either in the rectal orifice, in the sexual orifices and canals leading thereto, or in both; strangely, too, the subjects are often totally unconscious of these local troubles; that consequently in such cases, to remove the cause is to cure the patient. More than this, orificial surgery teaches that even when not a direct cause, the existence of such irritations greatly complicates the case and materially retards the recovery; that consequently, in such cases to remove them is to put the patient on the road to health by that much. It is like heaving the anchor for a sail or lighting the ship in a storm.

Specifically, orificial surgery requires the removal of all rectal troubles, such as piles, pockets, papillae, ulcers, fissures, fistulae, prolapsus and spasmodic spincters. It includes the cure of all urethral ailments, as strictures, inflammations and congestions, of all abnormalities in prepuce or fraenum. It makes large inroads into the field of gynecology, of uterine versions flexions, and inflammations and congestions—of internal and external lacerations—the proper treatment of preputial adhesions, of hymeneal irregularities or irritations; of vaginal diseases and urethral affections. Is this not enough for the dignity of a specialty?

He who has heard the voice of this prophet in the wilderness and yet fails to give the unhelped the benefit of his cry is recreant to his highest duty. If you have a patient who has been through the methods of other schools, who has taken your own potencies high or low, and yet does not respond, carefully examine the lower orifices and see whether there be not some irritation which insidiously but surely saps his vitality and brings all your drugs to naught. Then if you know how, to cure him, if you don't, make haste to learn as you would master the latest remedy. It is just as much your duty.

402 E. Houston St.

A New York grand jury found indictments against the doctors who performed the autopsy on the body of Washington Irving.

For The Indianapolis JOURNAL.

"The Folly of Persecution."

Your very interesting editorial last Sunday, under the above head, shows how "the case of Giordano Bruno, to whom a statue has been erected and recently unveiled in Rome, illustrates the folly of persecution and shortsightedness of men," and that the statue was erected because of the persecution the man received 290 years ago, rather than any particular merit or ability of the man himself, and brings to my mind a similar case of persecution and recognition, except that the recognition was for merit as well as persecution, and came much sooner—indeed, during the life of the man honored. I do not refer to Morse, the discoverer of telegraphy, as I might, but to Samuel Hahnemann, the founder of the medical system called homeopathy, who sensibly and insensibly, directly and indirectly, revolutionized the medical practice of the world.

Hahnemann was born at Meissen, Saxony, April 10, 1755 (the eldest of a family of ten), and died eighty-eight years after, in Paris, about June 1, 1843. He received his doctor's degree at Erlangen, in 1779, and devoted the remaining sixty-four years of his life to unremitting attention to the practice of medicine and the production of medical literature, the amount of work being prodigious. There is abundant evidence that up to the time he announced his doctrine of homeopathy (in 1796) he was abreast of the times, even ahead of them, for his history shows he was also the founder of hygiene, the first to practice kindness to the insane, and he abolished bleeding, purging, salivation and the giving of overpoweringly large doses of medicine. In 1792 the gentle emperor Leopold of Austria died, and Hahnemann openly charged that he had been bled to death by his physicians, and proved it. From this time on he employed the bitterest invective against those who bled their patients, and made many enemies thereby. He was sixty years ahead of his time on this point, for as late as 1861 the illustrious Italian statesman, Count Cavour, was similarly slaughtered. Goethe was bled inordinately—even two pounds on one occasion right after a severe hemorrhage from the lungs! Raphael, Marabeau, Gessner, and many other noted persons were much injured, probably killed, by vivisection. Queen Louisa was thus bled to death. Princess Charlotte was repeatedly bled just before confinement, and died in consequence, as did her male

babe. Louis XIII was bled forty-seven times in one year. Lord Byron lost his life by being bled by his physicians despite his most sacred protestations, and the immortal George Washington was similarly served, the report of his last illness showing that he was bled thirty-two ounces in a short time! No doubt the old practitioners of to-day remember that in the early cholera visitations in this country, bleeding was confidently relied on, and as certainly disappointed. Think of bleeding a cholera patient! Yet the medical journals as late as 1854 rancorously assailed every homeopathic physician who discountenanced it, so slow were they to imbibe Hahnemann's teaching. Even up to 1867, bleeding was yet a favorite treatment for pneumonia, despite the safe treatment outlined by Hahnemann, in his books of 1811 and 1822. His advice in 1796 regarding the treatment of the insane reads well yet, even if it is nearly one hundred years old, and still ahead of our time, if we may believe testimony from near home. He said anent his cure of the chancellor's secretary: "I never allow an insane person to be punished either by blows or any other kind of corporal chastisement, because there can be no punishment where there is no responsibility, and because these sufferers deserve only pity, and are always rendered worse by such treatment and never improved."

He announced his doctrine of homoeopathy in an essay on "A New Principle for Discovering the Curative Power of Drugs," in 1796, in Hufeland's Journal, and hammered away for twenty-five years perfecting his system and defending himself from attacks on all sides. In some kingdoms, notably Bavaria, its practice was interdicted by law. Finally a law was passed, aimed at him, that no physician could dispense his own medicines. The apothecaries hated him because he had exposed their incompetence and used so little medicine; consequently he could not trust them to dispense his medicines. He was arrested, made an able defence, but it availed nothing, and he was banished, leaving Leipzig in 1821. As late as 1830 the censor would allow and encourage the most infamous attacks made upon him, his system and his followers, in the medical journals, and not allow replies, and carefully suppress all attempts at reply.—But nothing could daunt him, for he had the courage of his convictions. He writes: "I care nothing for the ingratitude and persecution which have pursued me on my wearisome pil-

grimage. The great objects I have pursued have prevented my life from being joyless. The satisfaction I have derived from this mode of treatment I would not exchange for the most coveted of earthly possessions."

After all, we can hardly wonder at persecutions in the olden time, when the system was new and its success was not well established, after pondering over the system of fanatical persecution tactics pursued in this country, even up to fifteen years ago, now happily abandoned, since it has pronounced boomerang qualities through its action on public opinion, for, as says the British Medical Review (allopathic): "Homoeopathy comes before us now, not in the garb of a suppliant unknown, and helpless, but as a conqueror, powerful, famous and triumphant."

In 1831 cholera broke out in Austria for the first time. Being a new disease, physicians could do nothing with it, and the country became panic-stricken. Hahnemann was appealed to, and responded to the call by indicating the successful treatment. So great success followed that by imperial mandate all prohibitions regarding the practice of homoeopathy were removed. Some time after the Saxon ambassador at Paris (where Hahnemann had removed) presented him with the freedom of his native town, and at Leipsic, whence he was banished in 1821, —driven from his home when sixty-six years old with his wife and four children—now stands a beautiful marble statue of him, inscribed: "In grateful recognition of his immortal teaching, and of his invaluable services to medicine."

WM. B. CLARKE, M. D.

Offensive Odor of the Breath, due to bad teeth or other causes, may be overcome by, or at least greatly abated, by the habitual use of Listerine. Add a teaspoonful to a tumblerful of water for a mouth-wash and gargle, and if a little is swallowed, so much the better. Indeed a bad breath is not unfrequently caused by the gaseous eructations of indigestions, and for this also Listerine is an excellent remedy, in doses of twenty to thirty drops in a little water.—*Sanitarian*.

Treatment for Catarrhal Affections of the Throat.—Dr. G. B. Hope, 34 W. 51st Street, N. Y., Attending Surgeon Metropolitan Throat Hospital, and Professor Diseases of the Throat, University of Vermont, says: "For a long time I have been employing Horsford's Acid Phos-

phate as a constitutional treatment for catarrhal affections of the throat. I consider it to be among the very best tonic excitants of the vocal organs, and particularly applicable in relieving the fatigue and huskiness of voice incidental to those who pursue a professional career of actor or vocalist, and far preferable to the various forms of wines now so generally recommended for this purpose.

I have seen no other allusion to its employment in this direction, which believe you are perfectly safe in recommending both from a theoretical and practical point of view."

In Fermentative Disorders of the Stomach, and in corresponding forms of diarrhoea, we consider Listerine certainly a safe, and also a valuable preparation. It is not at all unpleasant to take when properly diluted; especially, then, as an internal antiseptic do we recommend its use. It is, however, largely used as an external antiseptic, and its oily constituents give it more healing and penetrating power than is possessed by a purely mineral solution. As a toilet antiseptic to use after a post mortem or similar work, Listerine with its pleasant odor, needs only to be tried to find a permanent place there. Listerine is a very attractive-looking preparation, the liquid being crystal clear, with no sediment or undissolved oils whatever. The Lambert Ph. Co. have introduced their product strictly through the profession, which attests their faith in its efficiency.—*Maritime Medical News, Halifax, N. S.*

Things we Would Like to See.

More doctors subscribing for medical journals.

More text-books and journals used in daily practice.

Every member of the profession actively at work in the various medical societies.

More intellectuality in the profession.

More students who are going to climb to the topmost round.

More business and less animosity in the profession.

More of a progressive spirit actuating each physician.

All physicians contributing something valuable to the general fund of medical literature and experience.—*Medical Current.*

TAPWORM.—Give eight grains of salicylic acid every hour until five or six doses have been taken; then give a good big dose of castor oil. It is said to be very effective.—*North Western Journal of Health.*

Ethical Commandments.

I. Value your own time, and advice, in order that you may be appreciated by others.

II. Charge reasonable fees and collect them that the community may put the appropriate value on your services.

III. Be straightforward, firm, reliable and prompt, that you may be classed among good business men.

IV. Collect your bills promptly, lest your patients conclude that you believe your services are worth but little.

V. Consider the physician's bill a debt of honor.

VI. Be charitable and remember the poor.

VII. Be systematic in business, so that you may save money and time.

VIII. Sympathize with, and work for, your patients, but nothing affect the obligation therefor.

IX. Never impress the community with the idea that you are a poor business man.

X. Show the world that as a practitioner of medicine, you are not only a successful business man but a practical philanthropist, a litterateur, a cultured physician and scientist.

—*Medical Current.*

Bromomania.

The "Lancet" for May 25th points out some of the evil effects that follow the excessive use of the bromides by epileptics. In many cases the patients become wild and maniacal from the prolonged use of the drug, and in the asylums this condition is well recognized under the title of bromomania. In former times the same class of persons continued long about the same from year to year and did not require to be sent away to the asylums. This was before the bromides became the routine means of treatment in epilepsy at all the various dispensaries and out-patient departments. It is at those institutions, the "Lancet" fears, that much damage is done "by the drenching of the epileptics with the bromide." Then too many of these patients will go from one dispensary to another, and thus get loaded with an amount of bromide preparations that is far in excess of the intent knowledge, or conjecture of the respective prescribers. When, therefore, a practitioner finds that any of his epileptic clients give indications of an increase of excitability and violence, it will be well to investigate into the amount of their drug-consumption; it may be the invasion of bromomania.—*Exchange.*

Southern Journal of Homeopathy

NEW SERIES
NO. 8

San Antonio, Texas, September, 1889.

OLD SERIES
NO. 70

• • Editorial • •

The Brown-Sequard Exilir.

The Brown-Sequard *testicular* injection has come into disrepute among many on account of the statement that this fluid is the long sought "exilir of life." Brown-Sequard never claimed his discovery, if discovery it is, to be the "exilir of life." He claims that certain results followed its use when injected into his system; says that it formed an augmentation of muscular force, afterwards an increased intellectual power. The power of expulsion of fecal matter very much increased. He especially called attention to the fact that eleven days after its use, the good effects continued. He states that the effects are dynamic and not organic. The relationship existing between the functions of the testes and the brain, is sufficient evidence to convince us that there is a medicinal virtue in the preparation. If it is a known fact that castrated females lose both physical and intellectual vigor, it appears that Brown-Sequard has added what will prove to be a great remedy to our therapeutic armamentarium. If it produces these conditions, will it not help similar conditions produced by other causes? The injection is considered especially useful by those who have used it, in functional

troubles. If there is anything in it, let us leave it, persecution will not help us accomplish anything.

The following is a formula for the preparation of the "exilir." Take two pair of *healthy* sheep testes, just as soon as the animals are killed; strip off outer membrane, cut in pieces size of a pea, triturate for half an hour, put in fine cloth, squeeze and strain, use within thirty minutes of its making. Thorough antiseptis necessary.

The "Courier Record."

Another antiquated and consummate nondescript, in the editorial department of *The Texas Courier-Record of Medicine*, launches out into a venomous tirade against Homeopathy. The probabilities are that some follower of the principles of Hahnemann, in Dallas, has succeeded *mi lord editor* in some difficult case, and complete recovery attending the efforts of the true physician, *mi lord editor and doctor* is jealous. So soon as the patient informed the man of Allopathic habits of his improvements, he of the pen of the mighty "*Courier-Record*" seeks the columns of his journal to vent his pent up wrath, (two to one the homeopathic practitioner received a marked copy of the August issue of the Drs. Brooks-Rosser journal). Plagiarism ought to be classified as a penal offense, then trite schis-

matics might learn something new. By referenc to files of the London Lancet, Nov. 1850, and Jan'y and July 1851, a series of articles will be found, from which the howling, meaningless and would be violent declamation was evidently purloined.

To the editor: There is no semblance of a complaint in your editorial; it is a mass of words and lifeless sentences with out an idea. Swallow the inroads homeopathy is making on your practice, with a more dignified mein and try to think for yourself.

Maxims.

It is the *design*, not the *execution* of all great undertakings which requires deliberation and delay. Action cannot be too prompt.

Nothing is superficial to a deep observer: It is in trifles that the mind betrays itself. "In what part of that letter," said a king to the wisest of living diplomatists, 'did you discover irresolution?' In its *ns* and *gs* was the answer.

He who esteems trifles for themselves, is a trifler, he who esteems them for the conclusion to be drawn from them, or the advantage to which they can be put is a philosopher.

The manners which one neglects as trifles, are often precisely that by which men decide on you favorably or the reverse.

It is a dangerous thing to encourage too great a disdain of one's inferiors.

Study *nature* rather in men than fields, for no landscape afford such variety to the eye, and such subject to the contemplation, as the inequalities of the human heart.

It is no uncommon contradiction in human nature to find men of imagination and genius, gifted with the strongest common sense, for the admonition or benefit of others even while constantly neglecting to exert for themselves

News and Comment.

A moderate respect for the opinions of mankind induces us to enunciate a platform of principles, which we believe should govern the conduct of Journalists the world over.

First of all, our columnus shall be intensely and offensively personal. This much said, it follows that, instead of attacking a principle considered by us to be vicious, we shall assail the man who enunciates it, paying special attention to scandalous reports which may have reached our ears concerning the private life of the accused. We recall how effectually a work called *The Organon of the Art of Healing*, was squelched by scurrilous attacks upon the private character of the man who was foolish enough to publish it.

Next it is our purpose to see that no man's motives shall escape closest scrutiny, and in all cases where we find ourselves unable to overcome an antagonist with fair argument, we shall dismiss the matter under discussion by gravely aspersing the motives of our opponent.

We shall construe all criticism in the light of an attack upon our pocketbook and an offense to be punished by personal denunciation.

Typographical errors found in the column of our contemporaries will be the subject of leading editorials from time to time, our purpose being to reflect as seriously as possible upon the assumed culture of all editorial writers.

We shall be especially severe on cranks. Potency men, high and low, may expect no quarter from us.

Let it be remembered that, whenever we start out to prove anything, we propose to prove it, no matter what impediments are encountered. In doing this we shall sneer at our betters, ignore truth entirely and distort pages of history

to suit ourselves. Moreover, whenever we declare a certain man to be "the very highest authority" on a certain subject, we shall treat as heresy all contrary expressions.

We shall, as a matter of course, print complimentary notices of ourselves from time to time, displaying in heavy type all references calculated to cripple the resources of our contemporaries. We regard ourselves as the leaders of thought in the Homeopathic Profession, as well as well the custodians the only true creed whereby men may be saved; we hate modesty, despise bashfulness, and now gentlemen if you will give us your attention we will show you a few things in Journalism.

* * *

Our highly esteemed and always able contemporary; *The New York Medical Times*, finds fault with the address delivered by Present Talcott, before the American Institute of Homeopathy at Lake Minnetonka. We will state the position of *The Times* in its own words:

"The whole question is one of *name* and that question involves the honor of a great school. * * * * Is there any better term for an organization which claims to be bound by no exclusive stigma than that of the New School? We renounce principle, we disband no organization, but finding the old name "not broad enough to cover our belief and practice, we renounce it as a special designation for one more appropriate."

The Times pleads with the obdurate Homeopaths against a display of "sentiment" and if the above paragraph is not sentiment, pure and simple, we do not know what sentiment is. In other words, what *practical* gain could come from the renunciation of a truthful name and the adoption of a designation that means as near nothing as anything can mean? The term "*New*" if it means

anything, certainly indicates something "not old;" and as the *real* point of difference between the New School and all other schools would be the acceptance of the Law of Similars, otherwise *Homeopathy*, which is as old as the hills. We can think of no name more faulty than that so strenuously urged by our misguided contemporary. If the name Homeopathic is "too restricted" for present needs, how laughably incongruous does it appear in one to suggest the founding of a *New* School on something as old as itself. We are sure that the word "*New*" is too restricted, because our single distinctive feature is an ancient law, the scope of which is not, and probably never will be exactly, determined.

But suppose *The Times* should succeed in founding a School of Medicine wearing the name of its own suggestion, and we should ask a practitioner of the New School how his practice differed from that of his Old School neighbor, what *could* he answer but that he believed in and practiced *Homeopathy*. Thus, having the thing itself, one might as well be consistent and accept the name with it.

* * *

The tendency in modern medical Journalism seems to be towards a multiplication of editors. Looking over our exchanges from time to time we are occasionally amused at the number of "Department Editors," connected with some exceedingly unpretentious prints. Secular Journalism claims the "boss" editors; Allopathic publications bear unmistakable imprints of the "Jackass" scribbler, but it remains for Homeopaths to introduce such specimens as the "Genito-Urinary" editor, the "Gynecological" editor, and so on *ad vomit 'em*. We ought by all means to have a "Muscular" editor, an "Asseous" editor, and if one can be found, a "Rectal" editor. The "Muscular" scribe could attend to un-

pleasant callers, and the bony man might make himself useful by prodding up delinquent subscribers.

We may remark in conclusion that the leading Journals of the country has a single *Head* editor, who is a man of brains, and who gives his readers such splendid columns as those of *The Medical Era*, *The Advance*, *The American Homeopathist* and a number of other high-toned publications that might be named.

* * *

We are not impressed seriously by the alleged cures wrought by Dr. Brown-Sequard's "Elixir of Life." We are of the opinion that the storm now being raised over it is pure sensationalism. It started for the sole purpose of filling somebody's pockets. This opinion is strengthened by the fact that one of the most irrepressible sensationalist of this or any age, Dr. W. A. Hammond who can do more horn blowing behind a gravely dignified face than any doctor in America, has come out in favor of the "Elixir"—and himself. We suggest however, that as the "Elixir" craze, like "Christian Science" is to be another swell society affair, the testicles of dogs especiall poodles, be utilized instead of those of lambs.

* * *

It gratifies us to note the energy and ability exhibited in the present management of *The United States Medical Investigator*. The journal was and is famous for its meritorious contributions, and did splendid work for the cause of Homeopathy in its earlier days. About two years ago it passed from a deep sleep into a profound coma, from which it was resurrected recently by Dr. W. E. Reed, its present editor and publisher.

* * *

We are pained inexpressibly to find a deliberate attack upon "The Great Anti-Periodic" (*Natrum muriaticum*), in the columns of *The St. Louis Globe Democrat*.

We are sure that Col. McCullagh has not been reading *Medical Era* lately, for if he had the words: "*Salt must be put on the free list*" would never have found a place on the brightest page of his great daily. Do you not know, Colonel, that the cheaper salt is the more rascals are likely to adulterate it? Do you not also know, dear Colonel, that the more people are taxed the richer it makes them? Suppose the fifty thousand or more doctors of the country were allowed to buy their surgical instruments in the cheapest market, how long would it be before knife blades would crumble upon the approach of a mosquito? What would the poor, starving surgical instrument dealers of this country do? The very idea of closing out the business of a handful of firms for the benefit of tens of thousands! But would the placing of surgical instruments on the free list injure any "interest"? For an answer, one has only to ask Powers and Weightman, the gentlemen who howled so pitifully when *Quinine* was placed on the untaxed side a few years ago.

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In response to a query, No; Hahnemann was not infallible. In this respect he differs from some editors of our time.

* * *

On the night of August 7th, a train on the Wisconsin Central Rail Road was robbed by a single highwayman near Cadott, a station between Chicago and St. Paul. The press dispatches, narrating the outrage, contained this paragraph:

"Dr. E. Guernsey, of New York, who was in the sleeper, said: 'The robber was a very quiet and unassuming individual, and very kindly requested his victims to pass over any money or valuables that happened to be handy, and when he left the sleeper politely bade us all good night.'"

THE SOUTHERN JOURNAL OF HOMEOPATHY, however, is in possession of additional details which, for obvious reasons,

would find no place in the general dispatches. The robber, who was a man of fine sensibilities, approached the bunk of the distinguished editor and, in a "quiet and unassuming" tone, demanded cash of the occupant.

"Who are you, sir?" demanded the man in night dress.

"No matter, sir; who are you?" rejoined the obtruder.

"I am Dr. Guernsey, of New York, sir, and——"

"*Dr. Guernsey?*" interrupted the law-breaker, evidently familiar with the name.

"Yes, sir, *Dr. Guernsey.*"

"To what school do you belong?"

"*The New School.*"

"What school?"

"*The New School.*"

"Never heard of such a school before; hand out your cash."

"*Homeopathic school*, then, sir; may be you have heard of——"

"Ah, my dear Doctor, I beg a thousand pardons, My poor old mother and all of her children once had their lives saved by Homeopathy. Old Prof. Guernsey of Philadelphia was our family physician, and we loved him as one of our own. Forgive me—forgive me—I never robbed a Homeopathic physician in my life, and, God helping me, I never shall. But I must finish this job and get out. Good night."

It may be unkind of *THE JOURNAL* to reproduce in cold, black type the details of a conversation bringing out some of the noblest traits of humanity; but if it costs Dr. Guernsey anything in feelings, it will surely serve a good purpose by reminding our readers to be loyal Homeopaths when confronted by a train robber.

* * *

The Medical Advance prints a lengthy article from the pen of Dr. J. B. Bell, of Boston, on the decline of Listerism. Notwithstanding the sycophantic babbling of

some, and the misguided utterances of others, Listerism is destined for that long, wide, deep, dark grave, where all the worthless theories of the world are sure, sooner or later, to find a resting place.—Dr. Bell's paper is a peculiarly forcible presentation of the facts and figures against the great delusion which has misled so many able men in the medical profession.

* * *

From perusal of several college announcements that have come to hand we note the delicately balanced phrases by which students are informed that, after a few more seasons of disgraceful scrambling such as we have had in the past, we may expect a slight chance for the better. The course is to be lengthened, more time is to be spent in certain branches, students are actually to learn how to use certain diagnostic instruments, and an era of general enlightenment is soon to follow. So long as the State gives its creature, the medical college, power to examine applicants, so long as that power be abused. Fancy a number of rate-cutting diploma mills turning cash from their doors by excluding an ignoramus who fails to give the multiplication table. What business has a doctor with such a table? What use has he for English grammar? And, not to draw the line too tense, why possess any of the elements of a gentlemen?

* * *

The fact that a majority of the great street-car stables of the country are under Homeopathic care seems not to be generally known. Nearly all the leading stables of Cincinnati and many immense concerns at Chicago are in care of Homeopathic practitioners. So also are the car-stables of many smaller cities.

During the epidemic of "Pink-Eye" which swept over Cincinnati a few years ago, the success of Prof. Wm. Owens, Sr.

and others induced many men who owned large numbers of horses, to place all their animals under that system of treatment which kept the most horses well, and cured the most horses when they got sick. Apropos of this, a prominent brewer says:

Our company owns a large number of horses, and we find it a pure matter of good business to keep them under Homeopathic care. We know little and care less, about the nice points of distinction between the two Schools, but we do know that it is money in our pockets to employ the Homeopathic system in the treatment of our horses."

We believe in Homeopathy, it matters not under what name, New or Old it may be practiced. We believe in the single remedy, and we are not ashamed of our faith in attenuated preparations of that remedy. Every fact going to prove the superiority of Homeopathy over all other systems of therapeutics ought to be made known. The *Speedier, Safer and more certain* cure of a sick horse by this method of practice is a FACT which ought to set men to thinking. "Business is business," and business men generally get out the kernel without unnecessary trifling about the physical appearances of the shell. We can assure them that Hahnemann's law is just as good for sick men as it is confessed to be for sick horses, the next time any of them suffer from any bodily ailment we earnestly advise them to try it. This advice might seem superfluous were it not for the fact that many men who employ Homeopathy for their horses as a "matter of business" do not employ it when they get sick themselves. This seeming paradox calls to mind the words of the Holy Writ. "A righteous man regardeth the life of his beast.

SIMILIA.

• • Practice • •

Cyanosis.

BY W. A. MINICK, M. D., WICHITA, KANS. READ BEFORE THE KANSAS STATE HOMEOPATHIC MEDICAL SOCIETY, AT EMPORIA, KANS., MAY 2D, 1889.

Cyanosis is not always a condition or disease found in infancy; but it is observed in the adult life under certain conditions and different diseases. It may be met with in any disease in which there is not a full admission of air into the lungs. Or where there exists a hindrance in the proper aeration of the blood. The blueness or lividity of the skin is a characteristic of cholera, in which disease, either from alternation in the blood or from contraction of the smaller branches of the pulmonary arteries the blood ceases to pass in quantities sufficient through the pulmonary capillaries. It may in some cases be present in bronchitis, œdema, emphysema, pulmonary congestion, or other organic lesions. Lastly, it is very frequently observed in cases of heart disease, especially of the right side of heart and is most frequent in congenital malformation. In these cases it might not be considered a malformation exactly, but a failure of the heart to unite the foramen ovale. The cyanotic condition may present itself at birth, in a few weeks or perhaps a year or more, which to some extent might be on account of the foramen being very small and contracted and gradually becoming more dilated as the case advances.

I desire to notice more particularly the various portions of the body where this blueness predominates. It is most pronounced in the cheeks, lips tongue and extremities. Here the natural rosy hue may merely present the slightest degree of purple, blue or almost black; or it may assume a jaundiced or dark yellow color.

I have observed in some cases an entire jaundiced condition of the whole body, and yet was conscious that a malformation existed at the foramen ovale. However, the tint varies from time to time. It becomes intensified under the influence of exertion, mental excitement, exposure to cold, catarrhal or other like affections of the respiratory organs. In some cases it almost entirely disappears during the period of quiescence or sleep.

The eyes are sometimes congested, oedematous and glistening the lips, the nose, and perhaps the eye-lids are tumid, the circulation feeble, the surface (especially the extremities) generally cold, but according to Dr. Peacock the internal temperature of cyanotic patients is perfectly normal. There are some of the most prominent symptoms of this formidable disease, if it might be called such, and having had several cases and one that I particularly interested in and had occasion to watch day and night for six months, because it was my own child, born Nov. 11th, 1885, with no particular difficulty except the cord was three times around the neck and was removed with some trouble. The child (a girl) was apparently perfectly formed, seemed natural in all the functions of the body. The skin was a rosy hue. On the third day I noticed the lips becoming blue, circulation impeded, pulse quick and irregular. The fourth day developed a decided cyanotic condition. Several days elapsed before any noticeable change occurred, then the sutures of the cranium which had seemed to have been united began to separate. The fontanelles became larger, extremities cold, respiration difficult, sleeplessness, increased fretfulness, increased emaciation with loss of appetite, diarrhoea, alternate with constipation. At the beginning of the third month a decided improvement was noticeable. The surface at times was quite normal unless when it

was moved much or became fretful, then it became blue. It continued to alternate from better to worse up to the sixth month when the cyanosed condition was constant and the skin at times was almost black. Diarrhoea, which had been relieved to some extent, now became very profuse. The muscular fibre had almost all been absorbed and it was a true living skeleton. Its appetite was very ferocious and could scarcely be satisfied. Its mother being in fine health, it was continued at the breast. On the second day of May, 1886, it had a convulsion which ended in death. The treatment was prescribed by Drs. Whitlock and Longsdorf, and consisted of Cal. Carb., Digitalis, Arsenicum, etc.

Case second was a male child, born on the sixth day of Nov., 1888. Two years previous the mother had a paralytic stroke which resulted in the loss of motion of left side and had never recovered. The child weighed two and one-half pounds, and for the first few days was normal in appearance; but after a time the skin became jaundiced, white of eyes yellow, urine saffron color and gave forth a strong foul odor; bowels regular. A few doses of digitalis the 6th was given and the jaundiced condition gave way. The child was fed fresh cow's milk and digitalis the 6th was continued twice per day for three days, when it was stopped. It continued to improve until the second week, when I was again called and found it with a sluggish circulation, bowels constipated, urine high colored, no appetite, fretful, sleeplessness, throbbing of fontanelles, especially the anterior, haggard look, vomiting milk. The indigesta being sour and cheesy. Gave Calc. Carb. the 6th every two hours during the day; at night Chamomilla occasionally. The milk was discontinued and Mellen's baby food was substituted. The next day it was better, vomiting had ceased, bowels moved, skin not so yellow; Calc. Carb. continued three

times a day, and Digitalis 6th once a day. This treatment was given one week, except Calc. Carb. twice a day. I called in seven days and found a decided improvement; digestion good, bowels regular; all medicine was stopped but Digitalis twice a week. I was summoned in haste about thirty days afterward; found the child recovering from a slight spasm. I saw at a glance what I had suspected for some time, a case of cyanosis. Skin blue, eyes glassy and very white, extremities cold, respiration laborious, crying as if it would lose its breath and sink away. Hamamelis was given for a few hours with no avail; appetite ravenous, diarrhoea set in, stools white; Calc. Carb. was then given in alternation with Digitalis. In two days bowels were better, stools normal, appetite more natural, more marked blueness when moving or crying, spasms still continued, though slight, veins distended. Hamamelis was again resorted to with some improvement for a few days. At the beginning of the fourth month spasms increased in severity and became more frequent, sometimes six or eight in twenty-four hours. Diarrhoea, emaciation, vomiting and spasms continued until relieved by death. These two cases presented such a similarity of symptoms that I could not refrain from noting them. Other cases I have had that have lived for five years, which through all this time presented the same livid hue, and they could never bear excitement or exertion, but what this blueness would become intense. The great question in my mind is: Can there be no remedy found to meet the indications in this fatal disease? Or is the malformation so great that any remedy ever yet proved can perfect a cure?

J. M. CREWFORD, A. M., M. D., late Professor of Physiology and Physical Diagnosis, in Pulte Medical College, has been appointed Consul General at St. Petersburg.

A Mistake.

PER. SULP. OF IRON AS A CURE FOR HYDROCELE.

On the 20th of last April, a child three years of age was brought to the Dispensary, suffering from Hydrocele. I determined to treat the case with hypodermic injections of Compound tinct. of Iodine. Drawing about eight drops of what I supposed to be the Iodine into the barrel of the syringe, I injected it into the hydrocele fluid. Then carefully manipulated the scrotum for a few seconds. Two days later I saw the case again. On examination I found the entire scrotum intensely inflamed, and at the lower extremity, where the needle had been inserted, it had assumed a blackish hue, due no doubt to the settling of the Iron to the bottom of the scrotum. The child appeared drowsy and indifferent, moderate degree of fever. This was more than I had bargained for, so ordered equal parts of Witchhazel and Aqua Dest'l applied by means of soft compresses. Administered Aconite internally, and supported the scrotum by means of a diaper. On examining the bottle again I discovered that its contents instead of being Iodine, was a solution of Per. Sulp. of Iron. The child came to the Dispensary three times a week, for two weeks, when the case was discharged cured. The Hydrocele having entirely disappeared from the one injection. Nothing remained but a slight discoloration at the extremity of the scrotum. I saw the case again in three weeks and on examination of the scrotum saw no trace of the discoloration. I have not had the opportunity to test the efficacy of Per. Sulp. of Iron since, but would not hesitate to do so. I have never heard or read of it being used to promote absorption of hydrocele fluid, and would be greatly pleased to hear reports from other cases.

T. E. LINN, M. D.

Resident Physician, Pulte Medical College.

A Case of Diphtheria.

By C. A. BOZARTH, M. D. LYONS, KANS.
 READ BEFORE THE STATE HOM. MED.
 SOCIETY, AT EMPORIA, KANS. MAY 2,
 1889.

Alice M. aet. 8, Nov. 15th taken with usual symptoms of diphtheria. Complained of aching all over, with headache and great nervous restlessness; also complained some of soreness of the throat. The next morning when I saw her, both tonsils were considerably swollen and covered with a thick dirty gray, membrane, beginning at the left side, with aggravation after sleep, being the most prominent symptoms.

Lachesis 30x was then given and alcohol locally in form of a spray every two hours. Next morning, the 27th she seemed much better, and the same treatment was continued. In the evening of the 18th I was called, as she was reported worse. I found her very restless, and she would cry out and spring up in her sleep and after worrying a few minutes would again fall asleep, to go through the same thing in twenty or thirty minutes, complained of much pain in the region of the bladder and the urine almost suppressed, with frequent attempts to urinate. On the above symptoms Apis 3x Trit. was given and she soon began to show improvement and quieted down. Next morning, the 19th, she seemed much better, and same remedy was continued. On the 20th the urinary symptoms seemed a little worse with no other perceptible change, and Cautcharis 3x was given. That evening I was again called as she was worse, I found there had been no urin passed since morning. with much complaint of pain in bladder and bowels. There was a complete aphonia, the hoarseness beginning at 3 P. M. with the entire loss of voice in four hours. She would sleep from a half an hour to an hour at a time and wake up seemingly choked, and

gasping for breath, and spring up perfectly wild, throwing herself from one end of the bed to the other, and could only utter a whining whisper and beg to be killed, saying she could not stand it. She would gradually quiet down and in fifteen to thirty minutes, fell asleep again. She would not allow me to see the throat after the 19th, but there was little external swelling and very little difficulty in swallowing. She drank a pint or more of milk each day with considerable water. I reached there at 8 P. M. and of course gave an unfavorable prognosis, having no hopes that she could survive both the laryngeal and urinary complication. As a last resort I gave Ammonium Causticum 2x on indications given in Therapeutics of Diphtheritis by F. G. Oehme, M. D. There was no noticeable change till 12 P. M. when she passed about a pint of urine, after eighteen hours suppression and became quieter. She improved slowly till morning, then as nothing had passed her bowels for three days, I put powder of Nux. Vom. in water and a few doses caused a passage of a few dry balls. The Ammon. Canst. was continued with dilute alcohol locally and she improved gradually from that time on. She regained her voice by the second day, the urinary symptoms being the most persistent. Nux. Vom. and Terebith were used as intercurrents, for the bowels and urinary troubles, Enimas were ordered for relieving the bowels, but on account of the nervous irritability, could not be given till convalescence had set in. I discharged her as cured, on the 27th. The prominent features of the case were: no exhaustion till convalescence had set in, when she seemed quite weak for a time. The extreme nervousness and irritability with the laryngeal and urinary complications. Lach. and Apis. both failed to check the disease, though each gave temporary relief. Pulse at no time over 145 per minute.

Cerebro Spinal Meningitis.

READ BEFORE THE KENTUCKY STATE HOMEOPATHIC ASSOCIATION, MAY, 1889, BY GEO. M. OCKFORD, M. D., LEXINGTON, KENTUCKY.

A disease of interest to the profession is Cerebro Spinal Meningitis. Ever and anon it is reported to be in the midst of a community and new made graves are seen as a consequence of its ravages. It is not a new disease, having been recorded in medical literature as early as the sixteenth century. It has raged in epidemics and epidemics, and often occurs in single insolated cases. From the times of its occurrence, it has been supposed to be an ally of catarrhal fever, of typhus and of pneumonia, the epidemics occurring when these various diseases were prevailing. Its causes have been ascribed to miasmatic influences, and the searchers after germs have found its peculiar micrococcus. It occurs at all seasons of the year, although the greatest epidemics have been noticed in the spring and autumn, following the tendency of all zymotic disease in the great mortality that attends its visitations.

Its onset may be sudden and a fatal result reached in a few hours. In fact the greatest danger to life is in the first three or four days of the attack. Other cases exhibit prodromata of debility, anorexia, nausea and slight fever, with a constantly increasing headache and cervico-dorsal pain until prostrated by the disease. The pain in the neck is increased by motion and pressure upon the spinous processes. Delirium usually sets in about the second day, but is never severe enough to make the patient forget his terrible headache and cervical pain. The temperature runs high, and the skin feels hot, burning and pungent, and is extremely sensitive to touch. The great extensor muscles of the spine, become rigid, drawing the head backwards, and in some cases bending the whole spine

like the segment of a hoop. The spots appear on the second to the fourth day as petechiæ, but are not a constant symptom, some epidemics running without any of the characteristics that gave the disease the name of Spotted Fever. The spots vary in size and are red, purple or black, and do not disappear on pressure. The face of the patient exhibits suffering or has a fixed apathetic aspect. In other cases the force of the disease seems to fall mainly upon the lungs and the attack will simulate the most violent pulmonary congestion, with rapid, irregular and difficult respiration, a blue, cold and clammy skin and a weak and frequent pulse. These symptoms are combined with hyperaesthesia of the skin and cervico-dorsal pain and tenderness.

The temperature and pulse show greater variations in Cerebro-Spinal Meningitis than in most other diseases, and these irregularities have been considered by many to be pathognomonic. The beginning of an attack may show a temperature below the normal standard, and in a few hours or as soon as reaction occurs, it may reach 104° or even 106° . Some epidemics will have no cases in which the temperature reaches 104° , while in others the tendency will be far in excess of those figures. The pulse changes frequently in every twenty four hours. At times it is quick and slow, changing quickly. No other disease of a similar character exhibits such an irregularity in the rhythm of the pulse, and when this is associated with an irregular temperature curve and cutaneous hyperaesthesia, we have a trio that most certainly indicates Cerebro Spinal Meningitis.

The prognosis of such a disease must necessarily be uncertain. In attacks coming on with great prostration, coma and general symptoms of collapse, death may occur without the occurrence of reaction. Its acute duration is short, ending life in

a few days or rapidly passing into a chronic condition of ill health, which may require months or even years to recover from. The great strain upon the heart injures that organ, and after the prevalence of some epidemics many of these affected, died suddenly from heart after it was supposed they had entirely recovered. The occurrence of *tebanus* generally means a fatal termination and paralytic conditions and derangement of special senses are recovered from, only after a lapse of time. Such a protean disease must necessarily require many remedies and we can only hope for success in its treatment by careful individualization, and a prompt application of the indicated remedy.

Some Peculiarities in Practice.

READ BEFORE THE KENTUCKY STATE HOMEOPATHIC ASSOCIATION, MAY, 1889.

When Gallileo was forced to recant his doctrine of the world's motion, he whispered to a friend standing near: "Never mind, the world *will* keep moving."

The *motion* still keeps on and will continue to do so when we are gone.

Hahneman's instructions in Pharmacy were as exhaustive and implicit as was his care in selection and the administration of *the* remedy.

Like the world, the methods of Homeopathic Pharmacy have kept moving, and the method and motto of all should always be *the best*.

The best secures to the Physician, every medicinal principle that a drug possesses and thus gives him a potent weapon in curing disease; and if his time and energy has been judiciously placed on his main studies, Physiology, Diseased Conditions and Materia Medica, he is there to stay, and to cure.

Physicians have various ideas on this subject, and in order to get the *best* results, some rely on quantity more than

quality, buying tinctures of any make, or even Fluid Extracts, that are outside of Homeopathic Pharmaceutics, others are particular to buy the best tinctures, such as are made by B. & T. and other reliable Pharmacists. A few prepare dilutions according to formulas that have been prepared by scientific Homo. Pharmacists, who have made a study of this, that give clear solutions and bring out all of the medical strength.

Others utterly disregard these formulas and make dilutions with wholly with alcohol, and produce a mixture that resembles a vial of stale urine, more than what a dilution should be. The cloudy sediment in those vials represent so much drug material and potent power wasted, which *may* contain the main curative elements.

Water dissolves in many cases more than alcohol, and the omission of water in most of the lower dilutions simply means throwing away a large quantity of drug power whose curative action is needed to effect a Homeopathic cure.

It is in this same peculiarity, when triturations are not thoroughly subdivided, and machinery is undeniably the best for triturations, when the machinery is so arranged so as to keep the mortar and pestle covered. It can run uniformly, while to make a trituration by 15 amendment power, you would have to stand over him to see it done correctly, while the practicing Physician's time can be more profitably employed in studying up *hiscases* and *materia medica*.

Other Physicians buy the remedies they need, and of the potency they find useful, already prepared, and if they have posted themselves an *materia medica*, are always successful.

Accuracy and precision are the great essentials of Homeopathic practice, and the disregard of many of its most simple requirements in the preparation of their remedies, constitutes one of the most astounding peculiarities met with in practice.

J. F. EDGAR,
Lexington, Ky.

Notes of Kentucky Meeting—May 29, 30 and 31.

"The known hospitality and courtesy of Kentuckians made an address of welcome unnecessary."—Secretary John's Report.

Profs. Buck, McDermott, Walton and Pauly were present and unanimously elected to honorary membership.

Prof. McDermott's paper on "Mastoid Diseases" was principally devoted to impressing upon his audience that the use of the knife was imperative in such cases and that the incision should be made through the periosteum of the mastoid process; he cited the case of Coupling, and other prominent patients as illustrations of the frequency of the disease.

Prof. Walton's paper entitled "Abdominal Surgery," cited some amusing mistakes in diagnosis, and Prof. McDermott facetiously dubbed the paper one in "abominable surgery." The discussion of Dr. Pauly's paper on Pruritus Ani, brought out the following thoughts: The disease is generally associated with a congested rectum, which in turn is due to some rectal disease, to abdominal plethora, to uterine, or urethral trouble, so that thorough orificial work must be done and the patient's habits of life perhaps altered before the cure can be considered as begun; in such cases the disease often lingers after all this is done, requiring patience and care; the epidermis is entirely gone and is supplanted by a non-pigmentary white elastic tissue. That the trouble is a nerve reflex and must be met by remedies usually thought of for reflex nerve troubles, *Caprum*, *Zincum*, *Cham*, *Nux*, and by local circulating stimulants as electricity or solution of carbolic acid, Merc Bichloride. A salve composed of Oil of Cade 3vi, Vaseline 3vii, to be used each night, is quite efficacious, also the salve made by our pharmacists called generally pheno-calendula cerate. The local applications should possess anti-septic

properties. Tobacco, alcohol, condiments are to be stopped. The disease is intractable; the physician must first lay the organic foundation by removing every case of local congestion and then treat perseveringly.

The following gentlemen were admitted to membership:

J. C. Norris, M. D., Winchester, Ky.; J. H. Righter, M. D., Cynthiana, Ky.; C. W. Morris, M. D., Lexington, Ky.; Rufus Conrad, M. D., Louisville, Ky.

Drs. W. H. Righter and A. L. Monroe were appointed delegates to the Southern Association meeting in Memphis, next November.

Louisville was made the place for the next meeting in May, 1890.

The incoming president will act upon the suggestion of President Meredith and appoint committees to correspond with physicians of adjoining states with a view to arranging for the meeting of several state societies together in the near future.

The Kentucky association is but three years old, but it is a very lusty youngster, and has a number of very determined men to champion the cause; the attendance this year would number close to forty and was much the largest in its history.

Since our last meeting, in Lexington, the Homeopathic pharmacy seems to have prospered most remarkably; it now occupies large and commodious quarters in a central location and its energetic and enterprising proprietors, Drs. Edgar and Ockford are to be congratulated.

Prof. Walton thinks that a baby's penis—that is if it has one—should be examined as soon as the baby is born, as the care of the foreskin cannot be begun too early in life.

During the discussion of Prof. Walton's paper, Dr. Dills mentioned a case of some years ago, when in tapping a man, he accidentally pushed his trocar into the colon and was startled by a flow of liquid

fæces from his canula. The man made a good recovery, seeming to suffer no inconvenience from the operation. Dr. Monroe, in that connection mentioned the fact that the recognised treatment for the colic of horses and cattle that was apt to be fatal was the puncturing of the gut with a trocar and canula and thus letting out the accumulated gas.

Dr. Johns is the Secretary *par excellence*. Conscientious, energetic, unselfish, painstaking, he has just the attributes necessary to make a first-class secretary, which as we all know is the life of a Medical Association.

Therapeutic Sphere of Hepar Sulphuris Calcarea.

READ BEFORE THE KANSAS STATE HOMEO-
PATHIC MEDICAL SOCIETY AT EMPORIA,
KANS., MAY 1ST, 1889, BY J. W. DILL, M.
D., DENTON, KANS.

This wonderful remedy was brought to us by that untiring chemist and master therapist, Samuel Hahnemann. It has found no place in the U. S. Dispensatory. Hahnemann's preparation is composed of equal parts by weight of the flowers of sulphur and the middle layer of the oyster shell, subjected to a white heat in a crucible. The preparation of the U. S. Dispensatory is composed of one part sulphur, and two parts of the carbonate of potassium. Hepar comes to us less perfectly proven than many other remedies, but from what we know of its "action," we are warranted in looking for effects in certain histological and pathological conditions. Those students who have gone farthest in the study of Hepar, teach "that in its ultimate action we have pus-genesis or suppuration." From my experience with Hepar, I am led to believe that Hepar plays a good part in quieting that extreme hyper-sensitive condition, which always precedes pus formation.

Since it has been affirmed to be a pus-

generator, it will not be amiss to look for some of the antecedent conditions which precede pus-genesis. To do this, study must be given to its *pathological* action.

1. We find in large doses that it produces an anti-plastic condition in the blood; and 2nd, in small doses, hyper-plastic effects are observed; such as we find in croup. It effects the skin, mucous and serous membranes producing lowered vitality in the skin, and exudations on both mucous and serous membranes. It produces inflammation and suppuration in the glands. Under its action we find the liver congested, disquamation of the kidneys, the tonsils both swollen and inflamed, and the lymphatics swollen, inflamed and suppurating.

Recognizing the foregoing conditions would naturally lead the pathological therapist to study the morphological arrangements of the tissues affected by it. Since *hyper-sensation* and *pus genesis* are found to be the general types of the drug it leads us to seek the *where* this remedy acts, and *how* it influences animal tissue. First, let us assume that it acts on the cells upon the basement membrane in both the mucous and serous membranes, second, on cells, *on* the connective tissue in the skin, and third, on the cells *in* the connective tissue of the glands. These being the chief tissues affected we readily see the therapeutic value of Hepar in congested exudative and inflammatory conditions, also those over-sensitive cutaneous diseases. Since small doses produce exudations on the mucous and serous tissues, we are to hope to be able to cure like conditions with one of the potencies, and since the large dose is productive of anti-plastic effects on the fibrous or plastic elements, the elements of nutrition in the blood, favoring conditions for cell migration, and consequently pus formation; here we are led to give it Low.

Reaching this point in tissue change,

the plastic fluid exudes to the surface of either mucous or serous membranes, and hardens so as to be recognized as a fibrinous membrane, and when in the case of the serous membrane, it may degenerate into pus.

The conglobate and the conglomerate glands are equally affected, with the general lymphatic system, which becomes surcharged and from the congestion or stasis thus produced, swelling, inflammation and suppuration results. This is one of Hepar's happiest fields for good works.

In the skin we find a marked degree of depressed vitality, evidenced by every injury, however slight, making a sore which is very slow to heal. Notwithstanding this loss of recuperative power, these sores, whether in the skin or in the glands are very painful, and often, almost always, there is a pricking, and sticking sensation, as if some foreign substance were lodged there, (*fibrous element of the blood lodged in the cells of the connective tissue which has become as a foreign substance.*)

This soreness, tenderness and erethism is so great the patient may even faint, or become so weak that he can not talk.

There are pustules and glandular swellings on the head and neck. The meibomian glands are affected; *a crop of styes*, very tender; inflammation of the conjunctiva, and ulceration of cornea, causing patient to bury the eyes from the light.

All of the Hepar symptoms are worse from a draft of cold air, or cold application. The styes which come singly on the upper lid yield better to Pulsatilla, and those coming in groups which are very hard, to Staphisagria.

Hepar has both acute and loss of smell. The exceedingly tender fissures and ulcers on the lips and corners of the mouth call for Hepar.

In the respiratory tract we find the tonsils swollen and tender, the larynx, trachea and bronchial tubes, also the

nasal mucous membranes are hyperemic, covered with mucus and often plastic exudations.

In the true or false croup, Hepar is one of the true curative remedies. The hoarse saw-like cough, worse on inspiration and worse when lying down, with a tendency to draw the head back, which puts the air passages on the stretch, is one of the sure indications for Hepar in cough or croup. The Aconite cough is worse on expiration. Aconite, Hepar and Spongia seldom need any assistance in the cure of croup, if given in the order here enumerated; they may be given high. The patient with light hair, blue or grey eyes and fair skin, may need bromine to help out; while the one with dark hair, eyes and skin may call for iodine.

In the advanced stages of both acute and chronic pneumonia, also that dreadful disease tuberculosis, Hepar does good in bringing about resolution in the former and absorption in all. The cough or sore throat which causes the patient to persist that something is lodged in the throat and cannot be removed. Hepar will both remove the cough and the immovable—*something*—“fishbone.”

For the advanced, or ordinary catarrh, or “colds,” Hepar renders good service, especially when the cough is worse in the after part of the night, after mucus has accumulated in the air passages.

In the digestive sphere of Hepar we find a sour metallic taste in the mouth, stomach prone to get out of order from very slight provocation, with a great desire for wine, vinegar and other acids, and strong tasting foods. Such articles seem to allay the gnawing hunger and “fill up,” or satiate the empty feeling which generally occurs in the forenoon. This peculiar distressed feeling is due to the atonic condition of the mucous membrane of the stomach (a similar depressed vitality exists here as we found in the skin). The

gastric and simple follicles and the mucous glands which are composed chiefly of a homogenous basement membrane, suffer from cell migration—*congestion*.

This same or similar condition is found under Hepar in the bowels. The constipation calling for Hepar is that form wherein there is a want of rectal expulsive power, not that the stool is hard, for it is not abnormally so; here too we often find that feeling as if something were lodged in the parts. Cause in this case traceable to portal congestion. The Silica stool in constipation much like Hepar, except the Silica stool comes part way out and then goes back into the rectum caused by the lost rectal tenacity. The diarrhœaic conditions are variable, acute and chronic; 1st, stools are yellow, whitish, lieuteric, and sour smelling, and painless; 2nd, greenish, bloody, slimy and sour smelling, and attended with more or less pain in the rectum. It is an important remedy in the diarrhœa of children, the whole child and stools smell sour. Stool in children mostly light color, showing the liver is off duty. Child may want chalk, starch or even lumps of dirt. Next to Mercury, Hepar influences the liver.

Hepar does good work on the liver in Bright's disease, which it is claimed starts in that organ, from its failure to properly dispose of the imperfectly oxidized blood which it often receives. Here it effects the cells as in the other conglomerate glands. Hepar acts well in the marasmus of children. Calc. Carb. Sulph. Ars. Phos. Calc. Phos. Carb. Veg. Nux Vom. and Cincona may be profitably studied in connection with Hepar in marasmus. It acts well in post scarlatinal dropsy: give early and low. Mentally the Hepar patient is sad, tending to suicide, forgetful, fretful, somewhat like chamamilla; cannot please himself, nor can any one else please him; hasty speech and actions; in this it is like Belladonna. It influences

the nervous system which presides over organic and animal life.

Like Calcarea, Hepar is a mal-nutritive remedy. Most of our aches and pains are due to a defective quality or quantity of nutritive material in the system, or excessive in quantity, rich in quality, which the "vital force" cannot properly dispose of, hence the deranged nervous system, the lymphatic and general glandular systems and blood. The true Hepar patient is undoubtedly scrofulous.

Hepar exerts less influence on the osseous system than either Calc. Carb. Silicia affects the mastoid cells, which evinces great pain, with or without acute or chronic diseases of the ears. It acts like a charm in the tooth ache following the abuse of Mercury. The teeth feel too long from inflammation the bone; pains worse at night; after the use of Mercury yield cheerfully to Hepar. Hepar is the most important antidote to Mercury. We have no remedy like Hepar to arrest at once a felon, if given early, or if given late and low it will hasten suppuration. Silicia plays an excellent part here also. It affects the cells on the basement membrane of the M. membrane of the urethra, causing a tardy flow of urine, which drops off short; effort painful.

The ulcers which appear on the sexual organs emit an old cheese odor. In pelvic and general peritonitis, when the pain and tenderness are found as the symptoms under most other Hepar conditions, if given early will lessen the mortality list of this dreaded disease; it will very often soothe like magic.

From its pathogenetic effects on the blood, as manifested in throwing out plastic exudation on mucus membranes, not unlike those seen in diphtheria, it occurs to me it ought to prove one of the remedies in this dread disease. Try it and report your successes and failures. Look at the pathology, and then hunt the similimum for the totality, the only true way to achieve the physician's desired goal.

Correspondence From London.

(Our Letter from DR. FISHER.)

LONDON, ENGLAND, *June 19, 1889.*

DEAR JOURNAL :—London is a great city and her hospital advantages are of a very high order, consequently a physician contemplating a visit to Europe for review in his profession, could afford to spend a portion, if indeed all, of his time in this city. Throughout the United States the notion prevails that Vienna is the medical Mecca to which the pilgrim searching for knowledge must go. I entertained this idea when leaving home and expected to spend the larger share of my time abroad there ; but I am almost persuaded to skip the Austrian capital altogether by the favorable impression I have formed of the opportunities presented here, combined with the testimony of American physicians returning from the continent, whom I have met in London. I am assured by them that London's advantages are the full equal of those offered in Vienna, and that English speaking physicians not thoroughly acquainted with the German language will be but throwing money away to go to that city for real benefit. It is still my intention to spend a part of my time there, but the testimony is so much to London's favor that I shall not be in a hurry about taking my departure, especially as I am thoroughly well pleased with the opportunities presented here for practical hospital review.

London has a dozen or more very large and thoroughly equipped hospitals, besides a large number of special institutions. All the larger ones have their "school of medicine" in connection with their hospital work and to these the visitor goes for his review. The plan is different to that common to medical college work in the United States, and I must confess that I like it best and think it much more practical, since the school of medicine centres upon and revolves around the hospital. The latter is the horse and the medical school is the cart, while in our country the order is reversed, and many of the colleges, I am sorry to say it, have practically no horse. Here the training is much more thorough and very largely clinical in character, and the student has no cause for complaint in the matter of indoor and outdoor hospital work during his college life.

Of London's hospitals, St. Bartholomew's is the oldest and one of the largest and best. It was founded in 1123. It now accommodates about seven hundred and fifty patients in its wards, and its out-patient department rendered

above one hundred and fifty thousand services last year. The London Hospital accommodates about the same number of in-patients as St. Bartholomew's, and its out-patient services amounts to about one hundred thousand annually. Guy's Hospital, better known in America than either of the foregoing, has beds for nearly seven hundred patients, but two hundred are now vacant for want of funds. Its out-service is also immense, but I haven't the exact figures at hand to give you. St. Thomas' Hospital is perhaps the most imposing looking of them all, and its site is an unusually fortunate, just across the Thames from the House of Parliament. It contains nearly six hundred beds, and it treats above twenty-five thousand out-patients a year. St. George's is located on Hyde Park, and St. James squad, in a very aristocratic neighborhood, and accommodates about three hundred and fifty in-patients. It also has a very liberal out-service but not so mammoth in proportions as those first named. Then there are the Middlesex, Charing Cross, St. Mary's, Westminster, North London, Kings College, and the Royal Free Hospitals, all having large patronage and excellent schools of medicine attached. There are also several hospitals devoted to the eye and ear, a number to the throat and chest, several to nervous diseases, as many orthopædic etc., etc., so that all the reviewer has to do is to pay his money and take his choice.

In Gynecology there are also half a dozen hospitals but none with a complete medical school attached. The So Ho Hospital for women is the most liberally patronized of those, and it has a very large out-clinic wherein are treated above three thousand patients a month. They have connected with this hospital a clinical course of four attendances per week, for six weeks, at a cost of eight guineas (forty dollars), and the immense out-clinic affords excellent opportunity for the investigation of all the diseases to which the female sex is heir. The operating days are Mondays and Thursdays and on the afternoon of these days, it is possible to witness almost any important operation known to Gynecology. The operations are free and are usually attended by a dozen or more American physicians, and a few from other countries. The operating wards are not large, and as the operators are exceedingly courteous to strangers it is possible to get quite close to the work, even at times, to do some minor assisting.

Besides spending a good deal of time at So Ho, I have been attending almost daily the lap-

arotomies at the Samaritan Free Hospital for women. This is rather a modest little institution, but it has been made famous by having long been the operating field of Sir Spencer Wells, who performed his second ovariectomy here in 1858, and for the next twenty years did more to develop the science of ovariectomy than any other one man in the profession. Two of his assistants for years, Greenville Bantock and Knowsley Thornton, have succeeded Sir Spencer and one or the other operates almost daily and sometimes both the same day. Knowsley Thornton follows to its minutest detail the Listerian method of antisepsis, which Bantock has abandoned altogether, paying, however, the strictest attention to cleanliness. The two operators, undoubtedly the most skilled Laparotomists in London, are open and avowed enemies and each tries his best to out-succeed the other in good work. So far, Bantock, with religious attention to cleanliness, has a somewhat better record than his opponent with Listerism, but the end is not yet and the contest is still on. The operations are all free at the Samaritan, and here, as at the So Ho, the operators are courteous to strangers who attend to see their work.

Having devoted almost my entire time in London till now to Gynecological study and investigation at the hospitals named, I have just engaged for a more general review at the school of medicine at St. Bartholomew's Hospital, and the last few days have been spent most profitably there. A fee of fifteen guineas (seventy-five dollars), is charged "qualified practitioners" for a season's attendance on the lectures and hospital work, with the privilege of subsequent renewal of the ticket without extra fee. Special fees are also provided for review in any one department, if a practitioner elects to take but a single study. The course is very different from that pursued in the hospitals of our country. The large number of applicants for relief are assorted and classified and assigned to waiting rooms, each with a brief written history of his case. The senior students and qualified practitioners in attendance are privileged to examine these patients at will prior to the hour set for their examination by the physician or surgeon in charge of the department to which they are assigned, and upon his arrival they assemble in his consultation room and in their presence their chief examiners, each patient in turn, diagnosing, prognosing and prescribing for them all, and, as a rule, giving a brief practical talk on each case. The difference between this clinic

and that of America lies chiefly in the nearness of student to patient and surgeon. The classes are so divided that but a limited number enter into the circle, and each take his part in the work in hand. As on-lookers we get it all, and thus far I find it eminently practical. Then, too, the seniors and practitioners are privileged to go freely through the medical and surgical wards with the attending physician or surgeon whenever the calls will admit, and the bedside investigation is gone into thoroughly in their presence. There are also clinical lectures in the various amphitheatres by the most eminent physicians and surgeons of the hospital, as well as an excellent quality of didactic teaching on all the usual subjects. I have found the pathological lectures with post mortem demonstrations exceedingly interesting, and am, in fact, quite charmed with my experience at St. Bartholomew's. The operators are all posted on the bulletin board and are free to all visitors and students. Special lectures on special subjects are also given occasionally. One of these in which we are interested, and which I shall take pleasure in attending, is to be delivered to-morrow night by one of the heavy artillery, Dr. Gee, on "Sects in Medicine." I presume we will be mopped from the face of the earth, figuratively speaking, but wouldn't wonder if we would rather enjoy the mopping. At any rate, Dr. MacLachlan, of the *Medical Counselor*, Ann Arbor, who is here for the summer, and the writer will attend and witness the performance, and without meaning to be egotistical, I don't know of two members of our school who are better able to "stand the racket" than ourselves. I'll tell you all about it in my next if it proves to be anything worth the telling.

There are a good many American physicians here now and among them a number of our faith. Some how or other we find each other out, and as a rule our men are as well informed generally as any we meet with from America. I have not had opportunity to learn very much of Homeopathy in London yet, but shall soon look up some of our institutions and brethren. I have had the pleasure of meeting Dr. Clarke, of the *Homeopathic World*, and at his institution should have attended a meeting of the British Homeopathic Society a fortnight ago, but for a jaunt to Liverpool that night, to meet friends from Austin, just arrived by steamer from New Orleans. Dr. MacLachlan and I have mapped out a little programme which will develop an acquaintance with our physicians

and affairs in London, and your readers shall have the benefit thereof in a future letter.

Through the kindness of Dr. R. T. Smith, the leading operator at So Ho Hospital, I was invited to the regular monthly meeting of the British Gynecological Society last week, and listened to some excellent papers, reports of interesting cases, and lively discussions participated in by Lawson Tait, Granville Bantock, Fancourt Barnes, Heyward Smith, McCome, of Dublin, Dr. Routh and other big guns of the British Isles. Among the interesting specimens shown was one of a large uterine fibroid necessitating hysterectomy with the patient five and a half months pregnant. The tumor, the baby and the uterus were all removed and exhibited, and the patient recovered. Four fibroids with their uteri were shown, all of the patients recovering. I witnessed two of these cases personally; one by Dr. R. T. Smith, and the other by J. Knowsley Thornton, since coming to London, and both patients make excellent recoveries. It is truly wonderful to note the work of this character being done here and in New York and to take note also of the results. Ovariectomies, oophorectomies, systerectomies and lapero-hysterotomies are of daily occurrence in all the leading hospitals of both countries, and a death from the operation or its results is almost an unheard of occurrence. Surely this is an age of marvelous surgery. C. E. F.

78 Talbot Road, Bayswater, London.

A few Things Known and Unknown

That Aconite is a Homeopath's lance, Phosphorus his liver stirrer; Podophillum his Mercury; Lachesis his gargle in Quincy; Sepia his uterine supporter; Beladonna his dilator for "oral" (a la Pratt); Hydrastis his purgative; Cantharis his diuretic; Rhus-tox his Pcheumatic bandage. The study of the therapeutic action of drugs, necessary to become a successful and honest Homeopathic practitioner.

I don't know why our State and other societies are not better attended by the profession; why so many are wrangling over potency; why those fellows who give the high dilutions are the only ones who report cures by one remedy, and give now and then a "recurrent" and no strength mentioned? Why a disease is named when they treat symptoms? How "dmm" is read in English, and what is the notation? What kind of "Pathy" are these? "One drop of the tincture of apis mellifica every two hours, will quickly

remove painful urination common to very old ladies," "fifteen drops of pulsatilla every two hours, is a specific for acute swelling of the testicles," half tumblerful to a tumblerful of as hot water as can be drank for hæmatermesis; "twenty to fifty drops of Rhus Aromatica for incontinence of urine in children and old people;" two drops mother tincture of Chamomile in one-half glass of water, teaspoonful every half hour, for diarrhoea of infants with green discharges? Why the Government officials at Washington send us Homeopath's blanks to be filled out for statistical reference, and address us as M. Ds.? Why the great "American Medical Journal" don't mention in its "complete" list of Medical Colleges of the United States one single Homeopathic College? Why, if we are not entitled to the affix, M. D., to our names, the wonderfully educated "lords of medicine" send us sample copies of their journals, and address us as doctors with the "tail" to our names M. D.? Why don't they address us as "quacks"? Why are there so many Allopathic journals taken by Homeopaths?

I have asked many questions. It is said "fools can ask questions that wise men can't answer," therefore, if these are not answered, I am entitled to the "palm" of "phool." Should you wish to know more that I know, speak out in your newsy SOUTHERN JOURNAL of the Lone Star State.

W. WRIGHT FRENCH.

Chattanooga, Tenn., July 17, '89.

Mr. President, and Gentlemen of the Homeopathic Association of Chattanooga. Edwin Arnold once said:

"What good gift have my brothers, but it came of search and strife, and loving sacrifice."

The subject to which I desire to call your attention to-night is not one of loving sacrifice, but one that is full of strife. It is

EMASCULATION AS A MEANS OF CURE.

It is by no means a new one. The wail of the Eunuch has been heard throughout our land as a mournful wail to lost manhood, ever since the turtle dove sent its first love notes upon the morning breeze. But the methods to be proposed here to-night for the relief of suffering humanity are so radical, so far reaching in their results, that the highest flights of the moralists' imagination cannot grasp them, nor that scientist calculate all the results that follow Emasculation. They touch upon all points of human society. Emasculation places the crown of victory upon Darwin's Evolution, makes heaven on earth, and extinguishes the torturers of the the damned. Indeed, so grand is my theme that I can only touch upon the border-land of

a redeemed world, giving you a glimpse as it were of what is ours to be, and await some future period to give a farther insight into this greatly desired reformation. To-night then, I would offer for consideration

- 1st. What constitutes Emasculation?
- 2nd. Why Emasculation?
- 3rd. Some of the results of Emasculation.

Before entering upon the discussion of the rights, necessities or results of so important an operation it is better that we consider,

- 1st. What is proposed to be removed.

Beneath an arch of soft tissues, supported by a bony structure is suspended a sack, thinly covered with long, loose, coarse hairs. Within this sack are two ovoid bodies, each about as large as a pigeon's egg composed of very dense tissue. (Here let me say, whatever we know of the testicles, physically is due to the patience, persistency and ingenuity of Dr. Graff.)

On removing this dense tissue, or enveloping membrane we come to a wonderful network, or system of delicate white tubea, called Tubuli Seminiferi, running back forming the rete Testis. These running farther back in convolutions, form into several unequal vascular convolutions, these unite and form into the head of these pipes or tubes, convolutions, called the Epididimus, which continues and finally concentrates in one larger tube, or excretory duct called the as Diferens or seminal duct, which open into the penis close by the prostrate gland. In other words, here is a most wonderful tubular networks, within whose boundaries are marching in dense column long ciliated animalcules, the future denizens of earth life. It is the vestibule between the seen and the unseen, the mysterious gateway of formative life, and the gateway for all that is to be of the animal kingdom. They are found nowhere else in the animal economy, except, on their outward course through this channel. They will jump full formed at one bound into the field of vision, ready to curse or bless earth life by their presence. Whence come they? Does man create them? If so, then he is his own Creator, a God, and worships himself.

For myself, I do not believe man creates, but simply absorbs, or breaths in from the atmosphere living monads, which enters the circulation and passes finally to their receptacle, the Tubuli Seminiferi, clothed in matter, and are first observed as these spermatozoa. Up to the age of fourteen or fifteen years in the human male, these tubes contain only a vicid liquid.

Then are to be seen long, hair like bodies, having a head and tail extremity. These animalcules are called spermatozoa, the future human. As the months are added to the boy, his voice changes to rounder, fuller tones. Push and vigor characterises him. The do and dare being in proportion as these Tubuli Seminiferi are crowded with healthy spermatozoa. Finally in the full vigor of his manhood, a tumultuous crowd are surging toward the outlet, waiting to enter into farther development, the next step in their unfoldment. As we watch the moving mass, we see them swaying under as various influences as the moods and influencies of the external world is thrown upon the mind of the human being. We see some are doubleheaded, some are double tails, some full round strong, pushing others aside, or overriding them. Others, again are weak, slim and feeble, scarcely moving. These are the future monstrosities that are given to earth life, the strong and daring, or the sick and feeble human being that is to be. Filled to repletion, with these spermatozoa, the human being is fit for treason, strategem and spoils." He is restless, pushing, scheming; does and dares all to triumph. And in proportion to the strength and vigor of the vessel and its contents is the success of the human male complete. In other words, gentlemen, a healthy pair of genitals is the foundation of success in business enterprises. To illustrate:

If a man at twenty to fifty years of age loses his property by material or outside causes, as fire, storms or casualties of war, he will recover and accumulate again. If however, there is an unusual waste, or throwing off of these spermatozoa, his intellect is weakened, he staggers in judgment, fails to make combinations, fails to grasp events and make them subserve his interests, and it results in his financial ruin, the cause or causes being internal or psychological. Hence we see rare cases of renewal of business enterprises after a failure at fifty years or upward. But let us follow the connections of the testis with the brain. From the testicles proceed upward a cord composed of artery, nerve and limphatics, which terminate in Aorta, Venacava and spinal chord, respectively. The nerve passes still upward and onward to the Medula Oblongata and finally is lost in the base of the brain. And I find that just in proportion to the diameter of the neck and base of the brain, is the genitals strong and active. Here is the seat or the force of the life of the human being. Here

rests the master passions of man till called into activity by his intellect. I have traced the long tortuous route till I am lost in the mysterious meshes of the brain tissues. I have led you to the gateway of the soul. We can go no farther. I only know the intellect will take fast hold of these lost branches and send the tell tale news down this long route, that a pleasureable opportunity is now offered for these spermatozoa to escape into a higher and broader field or development, and immediately all these microscopic citizens are buzzing as so many bees in a hive, with joy at the prospects of leaving their pent up U'tica.

2nd. Why Emasculate?

Man thus far in his earth life is a mystery even to himself. His own person is a house in which he never enters, and of which he never studies but the outside. Nor does he know much about himself until he has passed through sorrow and suffering. He comes into this world from the unknowable as the result of a complication of natural and physical laws, so marvelous, so intricate, that his ingenuity thus far fail to account for the fact that he exists at all. His form and qualities depend upon the physical conditions under which he was born, and back and deeper still lies those physical influences which in the present condition of our civilization, are surging and sweeping a perfect cyclone of hatred, passion, disease and death over all human society. Instead of trying to control these storms of passion, he is adding to their fury living largely on the flesh of maddened and frightened animals in their dying agonies, and farther washing it down with alcoholic stimulants. This then is the condition in which he finds himself surrounded. Hog, Whiskey and Tobacco. Rape, Ruin and Revolution. Masturbation Madness and Murder. Few, if any are willing or brave enough to take hold of the root of all trouble and tear it from our midst. Before answering why Emasculate I am confronted by that stubborn demand: What right, have you to mutilate the human body?

One of the greatest lawyers this country ever saw at the criminal bar, said law was anything plausible set forth and stoutly maintained. But we know that law is founded upon equity, right, the right to protect ones self. And the highest and noblest right, is that right which shall best protect the helpless from crime and criminals, and the reformation of the vicious class. And are we doing our best? Criminal records do not show that we are overcoming crime.

The highest civilized of all nations of the earth, with the immortal signet of U. S. stamped upon its brow, are paying over \$1,000,000 annually to keep down crime. And what a condition of criminal negligence, folly and recklessness have we to show for it. We have 60,000 in our penitentiaries and fully 500,000 prisoners pass through our jails annually, very few of whom ever reform. Mathews seeing the fearful condition in his day, of crime, want, disease and death, wrote a book on population which engaged the attention of Continental Europe and America, in which he advocated that population naturally tends to increase faster than subsistence as the great cause of evil and proposed as a cure.

1st. A preventive check, or operations to prevent propagation.

2nd. Positive check, or causes that increase mortality, as war, pestilence and famine. But it is now found that the conditions lie within, and not from want of subsistence, or external causes.

In 1850 we had one criminal for every 30,442 inhabitants.

In 1860, one for every 1,647 inhabitants.

In 1870, one for every 1,021 inhabitants.

In 1880, one for every 37 inhabitants.

Now with this data before us, shall any sentimentalism stay our hands? Then the right we have is that of self preservation. That foundation principle of a higher life—the greatest good to the greatest number. The various systems of theology, education and force are well nigh failures in the face of these facts. Here, even in our midst, and we are as highly civilized as any city in our land, possess all the normal forces of the 19th century, and still a christian woman on errands of mercy dare not walk the streets after eleven o'clock at night, for fear of the many human tigers that seek to ruin her even unto death if necessary.

This is indeed a sad commentary on our boasted civilization. Again I say something must be done. It is our right by law to mutilate the body by breaking the cervical vertebrae at an average cost of 6,000 dollars. Rather expensive work of fifteen minutes, which all property holders must contribute towards its liquidation. For the same reason I claim that we the people, have the right, and must use the means of punishment in such a way as shall restrain and reform the criminal classes. And that law which is the most deterrent in its effects upon the criminal is also the most noble, just and merciful, both to the state and the criminal classes.

Capital punishment by means of electricity is no doubt, a humane substitute for the rope or guillotine. But then I do not believe, and the above record bears me out, that we have worked a reformation in society, or even stopped the criminal from doing harm. No, gentlemen, not even got rid of him. Again I demand that something must be done, else crime triumphs.

I have stated at the opening of this subject that emasculation is no new thing. In the great temples at Karmack is depicted a scene of Ram-esis 2d, returning from the battlefield with captives, many of whom are undergoing the operation of castration, and in the corner of the picture are heaps of complete genitals which have been amputated. The same practice prevails to day all through that region of Africa where Stanley has penetrated. The Apache Indian delights in perpetrating the same treatment upon their male captives and their slain.

This shows that these nations and tribes had and have the courage of their convictions to control their enemies by emasculation. This operation is not simply more deterrent, but gives time to the criminal for reformation, both moral and physical. Here is another view that forces itself upon my conviction: The highway robber, murderer or rapist, born with a propensity for crime, would be able to take in all the significance of the operation which would deprive him of his innate vicious tendencies; and as it is in these he prides himself, he would consider some time before assuming the risks of crime, when he knows that conviction is surely followed first by emasculation, and then by long years of imprisonment.

We, as physicians, know, and to some extent should teach the people that the physiological and psychological relations that exist between the base of the brain and the generative organs is, in its nature, not like that chemical mixture the resultant of which is dynamite. If you do not want the resultant, stop the mixture. Sever the connection between the starting and terminal points of man's passions and the greatest of all causes for crime ceases. On the divine right of self protection, then, I claim the right to sever this connection by emasculation.

3D. SOME OF THE RESULTS THAT FOLLOW EMASCULATION.

If the operation be effected before puberty the Pomum Adam remains undeveloped, the voice wholly feminine, the whiskers few and feeble, the mental qualities sluggish. In fact the foundation of manhood is incomplete. If the operation be effected in later years, the once bold, pushing, reckless male is changed into the quiet, easy-going, non-resisting citizen. He rests content with what may fall in his way of existence, instead of striving to procure.

Melville, of arctic fame, in his experiences in the Lena Delta, says: "A religious sect of exiles at Yats, in northern Siberia, who are known as "Scoups," are most happy and well-to-do. Their terrible environments has awakened belief that it is a sin to propagate their specie,

therefore the males submit themselves to voluntary emasculation, and the females to the removal of their breasts. They abstain from all stimulants and flesh, are honest and upright in all their dealings. They are large, fat, bloated fellows of waxen paleness, of cheerful disposition, the males, as a rule, being beardless, the beard commencing to fall out shortly after the operation. While intelligent, there was a stolid, or rather flabby quietness about them that reminds one of a stall-fed ox." This is a pretty fair picture of those who have undergone the loss of the testes.

For further proof of his physical and pysical change, I need to only refer you to the quiet, patient ox from the roaring, pawing bull, the change of the neighing, prancing stallion, into the submissive working horse that can be led by a little child.

By emasculation we have converted the bold house breaker into the retiring, hard working citizen. It may not prohibit whiskey drinking, but it will take the knife, the pistol or the bludgeon out of his hands, and we have a helpless, inoffensive victim until the alcoholic influence is thrown off.

It is thus seen that the reformation commences immediately after the operation and continues its influence for good till death removes him from his sphere of usefulness. The good are given an untrammelled opportunity to grow better and the vicious cease propagating crime and disease, for it is a conceded fact that crime and disease is transmissible. We know beyond any argument that excessive lust begets excessive waste. Excessive waste begets want and disease. Want and disease, crime and death, the latter usually a violent one.

Now these conditions must be met by the better class of the community, from the artisan to the capitalist, and at a fearful cost! Now this system of emasculation proposes to correct all this by eliminating the cause of propagating crime.

As one looks over the field of human society, he sees that for thousands of years we have been fighting the criminal without considering the causes that made him so, and unless some other radical measure equal to emasculation be adopted, our children's children will be found fighting the same eternal round of crime and disease.

A word as to how we will present this to the people: As the law now stands, rape, on conviction, is punished with death by hanging. I would take the criminal upon conviction, emasculate him and sentence him to the penitentiary for life, then if ever a pardon be extended to him the community is forever safe from his ever repeating this crime. In the meantime the state has secured forty or fifty years of faithful service, and this course only will hold the human tiger in abeyance. Humanity would in due time see the deterrent agent in full force and control, and gradually add to the list of crimes so punishable, murder, repeated thefts, forgery, &c. Thus, by the operation of this law, a gradual extinction of criminals and crime is effected, the

wicked would cease from troubling, and the weary would soon have rest; that rest which the clergy has prayed and the prophets have sang so long.

D. G. CURTIS.

April 3d, 1889.

Address of E. P. Meredith, M. D.

PRESIDENT OF THE KENTUCKY HOMEOPATHIC MEDICAL SOCIETY, MAY 30TH, 1889.

Gentlemen of the Kentucky State Homeopathic Medical Society;

It affords me pleasure to greet you in this city the birthplace of our organization, and upon this, the occasion of our fourth annual meeting; and I feel this greeting would be insincere and incomplete if it did not contain some expression of my heartfelt gratitude for the honor you have conferred upon me in selecting me to preside over your deliberations at the present time. And I crave your indulgence, and ask your aid, in my efforts to make this meeting as successful as those that have preceded it.

In my judgment the scope of an address suitable for this occasion is necessarily limited, and I shall, therefore, make this as brief as is consistent with the importance of the subjects to which I wish to call your special attention.

We have ample reason for congratulating ourselves upon the steady and healthy growth of Homeopathy in this State since our last meeting. The business of our physicians has increased in extent and influence, Homeopathic sentiment has widened its boundaries, and strengthened its hold upon the people, until its just claims to an advanced position to the front rank of scientific medicine, are being heralded by its patrons, and conceded by our citizens, in fact, conceded by all, except those who are so blinded by prejudice, so steeped in ignorance, born of fanaticism that they can designate us murderers, or worse.

Further evidence of this growth and influence is the fact that frequent appeals come to us from residents of our towns and cities asking us to send them Homeopathic Physicians, and this in the face of the fact, that a goodly number of competent and well qualified physicians of our school have located in this state since our last meeting.

The meeting last year of the Southern Institute of Homeopathy in Louisville did much to bring our system of medicine into favorable notice among those who had not before investigated its claims to consideration and patronage.

The papers read at that meeting by some of our eminent physicians silenced the cry of "fool" as applied to Homeopaths by our "old school friends" (?) and strengthened our cause throughout this Commonwealth.

I do not think it either necessary, or advisable to consume the time allotted to this address in giving you a history of the first introduction of Homeopathy into Kentucky fifty years ago, when Dr. I. G. Rosenstine practiced and published a book on Homeopathy in Louisville; nor to the reintroduction, we may say, of Home-

opathy after the late war—its growth and especially its rapid growth in the last decade.

These facts are as well known to you as to myself, and need form no part of this address.

Since our last meeting, the law regulating the practice of medicine in this state has taken effect, and as far as I am advised, every Homeopathic Physician in the state has registered.

This law I regard as practical and just, and if fully enforced will, I think, ultimately suppress quackery in our state.

At the conferences held in Louisville, to perfect arrangements for carrying this law into effect, Homeopathy was fairly and honestly dealt with by the distinguished gentlemen of the "Old School" whom I, as your representative, had the honor to meet.

It behooves us now, that we are well organized and upon a firm basis, to harmonize all conflicting elements, bury all personal animosities, and come together upon common ground for the good of our cause. If we fail to do this, our past work is no value to us either individually or collectively, and the future of Homeopathy in our state, so far as the influence of this society has anything to do with it, will be blighted.

I believe, and state it as a fact not easily contradicted, that the future of our cause in this state depends largely upon the efficiency and success of this Society, and to make its success doubly sure let harmony characterize our proceedings at this time.

A very important thing to be considered in this connection is the adoption of some feasible plan to increase our membership.

I suggest that a committee be appointed, whose duty it shall be to see personally, or correspond with, all Homeopathic physicians in the state who are not members of our Society, and urge them to unite with us, and especially to importune the young men to come into the fold, for upon them we must depend for future growth and strength, and if they begin early they will make better and more earnest members.

Again, if we increase our membership to include all, the followers of Hahnemann in this state, we can, with reasonable prospects of success, urge the appointment of some of our members to positions of responsibility and trust in some of our State charitable or reformatory institutions.

We can all readily understand that such official recognition would greatly benefit the cause of Homeopathy in this Commonwealth.

And as another means of furthering our interests in this direction, following somewhat the suggestion of Dr. Claypool, of Ohio, I suggest that a committee be appointed to correspond with State societies of adjoining States, and if possible formulate a plan by which we may bring together the societies of two, three or more of these States in annual or biennial reunion. And by this co-operation, by the interchange of opinion, by this union of strength and numbers, pave the way to that recognition from our several State governments, to which we are justly entitled.

We could also at these meetings map out a course to be pursued at our State Society meetings that would be of mutual interest and benefit.

I feel that it is my duty to call your attention to the subject of medical legislation which should be carefully and closely watched, as we have reason to believe that our Allopathic Brethren will attempt to have the present law amended in such a manner as to jeopardize our interests, in other words to have another act passed to regulate the practice of medicine, and will so word the law that they will be the regulators. I think, therefore, that we, in this meeting, should signify our disapproval of any class legislation in reference to matters medical. We do not desire at the hands of our law-makers any exclusive privileges for Homeopaths; we do not seek, nor need, any law to force upon the people our special views of medicine, nor do we need such laws to maintain or sustain us in our profession. We are willing to leave this matter of the choice of physicians in the hands of an intelligent public.

Therefore, I suggest the appointment of a Committee on Legislation, of not more than five influential members of our society who will pledge themselves to watch these matters closely; who will see that our rights as citizens are protected, and that our interests as physicians do not suffer. That they will oppose, by all honorable means, the enactment of any law that will give to prejudice the power to suppress scientific truth, or curb medical progress as exemplified by our school.

I further suggest that this committee call the attention of the proper authorities to the justice of our demands for official recognition from our State government, and as a reason for such demands—if one is necessary—I will give you as briefly as possible, some comparative statistics, gleaned from the very able address of Dr. Pitcairn, of Pennsylvania, read before the State Homeopathic Medical Society of that State, September, '88.

These statistics clearly show that wherever Homeopathy has had an opportunity to test the law of similars in the asylums for the insane, the results have been gratifying alike to the public and to our profession.

The figures represent the summary of the statistics for five years:

"Insane Asylum at Harrisburg, Pa. (Allopathic) average percentage of deaths 7.49; average percentage of recoveries 4.37.

"Insane Asylum at Norristown, Pa. (Allopathic) percentage of deaths 7.59; percentage of recoveries 5.85.

"Insane Asylum at Danville, Pa. (Allopathic) percentage of deaths 4.82; percentage of recoveries 4.96.

"Insane Asylum at Dixmont, Pa. (Allopathic) percentage of deaths 8.33; percentage of recoveries 5.94.

"Insane Asylum at Warren, Pa. (Allopathic), percentage of deaths 7.27; percentage of recoveries 5.94.

"Average percentage of deaths in all the In-

sane Asylums of Pennsylvania (Allopathic), 7.19, and average percentage of recoveries, 5.35.

"In the Insane Asylum at Utica, Buffalo and Rochester, New York (all Allopathics), average percentage of deaths for five years 6.00; average percentage of recoveries 11.00.

"In the Insane Asylum at Worcester, Northampton, Taunton and Danvers, Massachusetts, (all Allopathic) percentage of deaths 6.30; percentage of recoveries 6.59.

"The percentage of deaths at the Homeopathic Insane Asylum at Middletown, New York, is 4.26; the percentage of recoveries is 15.10.

"The percentage of deaths at the Westboro, Massachusetts, Insane Asylum, also under Homeopathic control, for the one year of its existence, is 4.4; percentage of recoveries is 12.79.

"The percentage of deaths at the Insane Asylum at Ionia, Mich. (Homeopathic), is 2.6 to 3.2; the percentage of recoveries 12.00."

Now if we compare the best results of Allopathic treatment (as cited in New York), viz., average percentage of deaths 6.00; average percentage of recoveries 11.00, with the best results of Homeopathic treatment, viz., percentage of deaths 2.9; percentage of recoveries 15.10, the contrast is simply amazing.

Let us now compare the poorest results under the two systems of treatment. Homeopathic, highest percentage of deaths 5.26; lowest percentage of recoveries 12.00.

Allopathic, highest percentage of deaths 8.33; lowest percentage of recoveries 4.57.

These somewhat startling facts are of sufficient importance, it seems to me, to justify this society in appointing a committee to gather statistics from available sources in reference to those and all other matters pertaining thereto, and report such statistics, together with their deductions, at our next meeting.

When we look at our thoroughly equipped colleges, hospitals and dispensaries and see the grand work they are doing; when we name those of our school who have won fame in special lines—Gynecology, Ophthalmology and Surgery—we can point to them with pride, and in naming them, refute the oft-repeated assertions of our friends(?) on the other side that we are not educated in all the branches appertaining to a thorough and scientific knowledge of medicine. And while we have made wonderful advances in these special lines, it seems to me we have been neglecting or possibly have retrograded in the one specialty that gives us our superiority as a distinct school of medicine, and that gave to the pioneers in our cause a name and a fame as lasting as time itself. It is almost unnecessary to say that I refer to Materia Medica. The study of this has made us what we are, and it is to this we look for future advancement. And while our friends? of the "Old School" are following somewhat, although very slowly, in our footsteps—see Bartholow, Ringer and others—we are nearly a century ahead. But with this advantage we cannot afford to lag in our studies. If we are to hold our present position, if we are to continue in ad-

vance of the medical world, it must be by careful comprehensive study of *Materia Medica*.

The immortal Hahnemann truthfully said: "What we have to do with an art whose end is the saving of human life, any neglect to make ourselves thorough masters of it, becomes a crime."

I suggest that some change be made in this important branch for our future meetings, either by outlining the work expected of our bureau of *Materia Medica*, or by appointing a permanent bureau on this important subject, whose duties may be outlined by the resolution calling for its appointment. I make this suggestion because I believe more can be accomplished by permanent bureau of properly selected students of *Materia Medica* than by the present method of changing at every meeting. And if the reports of such bureau should embrace largely the verification of proving it would add materially to our practical knowledge of this branch of our art.

In the study of a preventive medicine—Sanitary, Science and Hygiene—the field is wide and, as yet, almost unexplored. It offers to the members of our society abundant scope for the exercise of our highest mental faculties in scientific research, and I believe we should look to this branch as the one in which we may win new and brighter laurels, and I hope some suggestions will be made that will insure good, faithful and painstaking work in this field.

Gentlemen, I have aimed to state to you as briefly as possible, and without effort at ornament, those things, that to me, appear to be necessary to our welfare as a society and to our advancement in our profession. And I hope this address, together with the suggestions it contains, will meet your approval.

In conclusion let me urge you to remember that vigilance and activity is the price of our existence as an organized body.

We are prospering now, and before us looms a future full of promise. Let us work together then, not for personal aggrandizement, not for selfish interests, but for a cause dear to us as it is full of blessings to humanity.

And as an ever present incentive to active and continuous labor, we have but to look around us and see the Pioneers of Homeopathy, who are with us here to-day, who have fought valiantly for the cause, and who, with no other weapon than similia, have triumphed in the strongholds of Allopathy.

Again, I thank you for the honor you have conferred upon me, and I trust your prosperity, happiness and success may be as full, profound and lasting as are my thanks and good wishes for each one and for all of you.

The Southern Association,

To the Homeopathic Profession :—The time draws near when the Southern Homeopathic Medical Association will meet at Memphis. It is entirely unnecessary to remind our friends of the value of organized effort in the South. The work of the Association is distinctively mission-

ary in character, and its utility is unquestioned. It merits and should enlist the best efforts of every physician who desires to see the cause of Homeopathy prosper in a section of country where "eternal vigilance is the price of liberty."

Our last meeting, held at Louisville, was a magnificent success. The meeting had a great many obstacles to overcome, but in spite of apathy, in spite of treachery, in spite of the devil himself, it did succeed, and no one who attended its sessions, whether he came as a friend or as an enemy, doubted the tremendous influence which the gathering exerted upon the popular mind. The addresses of Professors Pratt and Buck, delivered before a popular audience, were able, pointed and practical. These distinguished gentlemen were followed a night later by Prof. L. C. Grosvenor, of Chicago, who unfolded the joys and beauties of motherhood in his own delightful manner and in such a way as to strengthen our plea for mild medication with all who heard him. It is the purpose of the Association to again present a popular lecture at the November meeting.

Below is given a list of Chairmen of Bureaux, all of whom are expected to do their full duty toward filling their departments with good material.

Practice of Medicine, C. W. Taylor, M. D., Louisville.

Surgery, H. G. Bayless, M. D., Knoxville.

Gynecology, Sarah J. Millsop, M. D., Bowling Green, Ky.

Materia Medica, E. A. Meadow, M. D., Blockton, Alabama.

Sanitary Science, C. R. Mayer, M. D., New Orleans.

Legislative Committee, H. Z. Landis, M. D., Memphis.

Medical Literature, O. C. Rees, M. D., Owen-ton, Ky.

Ophthalmology, J. H. Foster, M. D., New Orleans.

Registration and Statistics, E. A. Guilbert, M. D., New Orleans.

These chairmen are earnestly requested to report to me in time for the program to appear in the October issue of *THE JOURNAL*.

Homeopaths of the South, come to Memphis in November! Use your personal influence to bring others with you. There must be no halt in our onward march. Work is necessary; organization is vital. The Southern Homeopathic Medical Association, now, henceforth, and forever!

HOWARD CRUTCHER,
Corresponding Secretary,
Memphis.

In all fevers, inflammatory conditions, in the acute gastric upsets which occur with delicate children and phthisical patients, in all gastric diseases, and in those conditions of gastric catarrh which follow upon obstructions in the pulmonary circulation, whether due to disease in the heart or lungs, liquid food containing a sufficiency of carbohydrates in soluble form as in Mellin's Food is essential to life.

Southern Journal of Homeopathy

NEW SERIES
NO. 9.

San Antonio, Texas, October, 1889.

OLD SERIES
NO. 71

• • Editorial • •

Living Forms.

"Flower in the crannied wall,
I pluck you out of the crannies;
Hold you here, root and all in my hand,
Little flower—but if I could understand
What you are, root and all, and all in all,
I should know what God, and man is.

The simple matter of life, protoplasm, assumes various forms in morphological processes, thus constituting the animal tissues. There is a great similarity in the tissues of all animals, those of the lower animals are coarser than in man, and the organs that these tissues compose are often very rudimentary as compared with the same organs in man, while in some of the lower forms of life the development is finer and more exquisite than in man. Differentiation, as a mere process of complexity, by no means explains the whole of the development. It may prove profitable to consider further the process of differentiation in order to determine what it does and what it does not accomplish.

The human embryo in the course of its development passes through the various forms which in lower organism are relatively fixed types. It is in turn mollusk, fish, reptile, bird, and mammal, before it assumes the distinctly human form. The

human therefore includes all lower forms of life. In the definition previously given it may readily be seen that the organism is something more than a body having organs. Indeed, some of the lowest organisms, like the *amœba*, are entirely destitute of organs, and yet these simple structures perform all the so-called organic functions: namely, those necessary for the maintenance of organic life. They must breathe without lungs, digest without stomachs; circulation is accomplished without heart or blood vessels, and reproduction without organs of sex. These various functions are performed by the same structure and at the same time. Respiration consists simply in the exchange of oxygen for carbon dioxide. Digestion consists in the assimilation of food to the likeness of the living structure. Circulation consists in the concentric and eccentric waves to and from the center, and so on. All these functions are performed simultaneously, thus constituting that condition called community of functions: namely, one and the same portion of matter engaged at the same time in the performance of many functions, as distinguished from that condition where several organs acting harmoniously perform as many separate functions. Herein may be seen the contrast between community of functions and widely differentiated functions.

DR. BUCK.

• • Correspondence • •

Our Letter from Dr. Monroe.

LOUISVILLE, KY., *Sept. 17, 1889.*

MY DEAR CLIFFORD:—While I am aware that an occasional short letter from this neck of the Homeopathic woods is not unwelcome, it has been hard of late to write and be interesting. The Homeopathic field of Louisville has been short of hands most of this summer, and those of us who were in working form have had our hands full. Dr. Frank Koehler has spent the summer in Europe, making a tour of the Hospitals and Clinics there. Dr. Chester Mayer has spent some time in the north, enjoying a much needed rest and recuperation, and others have been from time to time incapacitated by absence, sickness or other cause for work. I will to-day try to infuse a little interest in a short space by a letter of news and comment, though more perforce of *comment* than of *news*.

First, as to the Southern Association, acting under the solicitations of Dr. Green our worthy President, Dr. Ockford and I have been trying to increase all possible interest in the coming meeting among our Kentucky brethren, and I think with some success, and we have every prospect of a fair delegation. Prospects for men and papers from Cincinnati, Chicago, St. Louis and Southern Indiana, are most flattering. There is now no gist of doubt that Green and Lippincott are pushing matters much better than any President and Secretary we have ever had, and where is Crutcher? Bless my soul, somebody ought to find and chain that young man at Memphis, and make him work for that meeting as only *he* can work. Come forward Crutcher from the shades, we know you are modest, but nerve yourself and wade in.

In a recent private letter from Fisher, he speaks in most affectionate terms of the Southern Association, and says that he has made all his places with a view to being at Memphis without fail, and he will be there too, he also says many other pleasant things for Southern ears, but I cannot betray confidences. Louisville is not quite at a standstill Homeopathically for Dr. A. A. Cloaky of Philadelphia '89 has located here and will be heard from before many moons.

I am happy to relate to you an incident that occurred to me recently that goes far to show that Homeopathy is gaining more and more in the respect of the younger practitioners of Allopathy in the South. As you may know, I formerly practiced in Birmingham, Alabama, the "Magic City" of the South. Birmingham now has about fifty thousand people counting suburbs and all, and no less than a hundred doctors.

These doctors have a most flourishing association, the Jefferson County Medical Association.

Business and the desire for rest, together called me there for a week in August, and meeting during my stay, one of my old friends, an Allopathic physician, it was agreed to attend a meeting of their association that night, where he would read a paper. Many of the members being personal friends readily consented. After the paper was read and opened for discussion, one of the members arose and said: "We have with us to-night an ex-president of the Southern Homeopathic Medical Association, we would like to hear what he has to say on this subject." Several said "yes" and as there were no dissenting voices I arose and made a few remarks on the subject, and afterward when the discussion of another paper brought up the treatment of Chlorosis and Anæmia, I made quite a

long talk upon Schussler's theories and the use of Fer. Phos. and Calc. Phos. in trituration in that connection. I am proud to say that I never had a more attentive, courteous and interested audience, and several physicians came to me afterwards to get every detail, one obtaining a list of our works on Theapuetics and Materia Medica, and announcing his intention of studying Homeopathy and well may he, as there are but two Homeopaths there, and one of them a cripple from an accident last winter. The other, Dr. A. N. Ballard, a most elegant gentleman and accomplished physician, is very much overworked, and thinks many others could do well there. Being as familiar as he is with the field, I heartily second him in that. I believe I may say confidently before leaving this subject that this is probably the first instance on record, where an old school association showed a Homeopath such consideration and respect. Dr. Jno. Davis whose guest I was at the meeting, is pursuing some very original and painstaking experiments in intestinal anastomosis, using cat-gut mats of his own manufacture and invention, in the place of the decalcified bone plates, or the cat-gut rings now in use. He claims, with reason, to be securing better results than pertain from either of the other precedents. He had with him at the meeting, a dog that he had repeatedly performed this operation upon, using up a foot or so of intestine each time, until one would imagine the poor canine had no more intestine left than enough to describe a bee line from mouth to anus, but he seemed contented and even happy, fawning ever and anon upon the hand that was slowly but surely robbing him of his *prima viae*. What a time, to be sure the salacious and the wits of the press are having over the Brown-Sequard matter. How they ebulliate, cervuscate and scintillate, and what

a little bit is being realized beyond an opportunity by the papers to fill their columns during the dull season, and a little cheap notriety by a few pseudo scientists. I thought at first that the common "yaller" dog of commerce had at last found its real function, but my hopes were soon destroyed in that line and I found that the frolicsome lambkin was being laid on the altar as of yore, but, alas! only to subserve that most unholy of purposes, of restoring some ancient *roue* to virile vigor, a procedure that if it succeeded, posterity would have much less to thank God for than we of to-day have.

It seems to me that the festive adult Thomas Cat possesses more sexual power to the square inch than any animal yet discovered, and reasoning up to all the lights we have he would serve this purpose best and is of little use for anything else. Such a course if successful might also contribute to the present economic tendencies of the age by materially reducing the average consumption of boot-jacks and profanity.

I have spent some time recently in feeling sorry for Dr. Weir Mitchell. I have no doubt, the eminent gentleman would be amused at the sympathy of such a medical minnow, and he is welcome to all the amusement he can get out of it. His article on snakes in Aug. Century was calculated to add to his reputation as a scientist, but how many thousands of its readers will think less of him for his uncalled for and undignified dig at Homeopathy? As to we Homeopaths it shows us even more clearly what we already know i. e., that no Allopathic physician ever attains such an exalted place in the medical firmament that he cannot find time whenever the opportunity offers to squirt a little venom at the followers of Hahnemann. The only way I can explain such little things, from such great minds, is upon the theory that they get into the habit while they are yet small and like some little boys with nocturnal enuresis they find it hard to overcome old habits.

A. L. MONROE.

Our Letter From Dr. Fisher.

PARIS, FRANCE, *Sept. 4th, 1889.*

DEAR JOURNAL :—Since I write you last I have been over a good big part of Europe, but before I tell you anything about the continental cities, their hospitals, etc., I will touch upon Homeopathy in London, just a little, in accord with my promise to that effect in a former letter.

Homeopathy is not strong in point of number of practitioners in the English metropolis, but she has some most excellent men who have fought hard battles for her and have achieved not only much individual success, but have won for her a strong position, when the conservatism and fogysm of England are taken into consideration. Dr. Bayes, who died a few years ago, was a foremost worker, and was in a better position to further the material interests of our school than any of his followers. But Dudgeon, Dyce Brown, Clarke, Compton, and others, are

HOLDING UP THE BANNER

in a most worthy manner, and are ever found ready to speak out in no uncertain voice when the foe attacks or the honest enquirer seeks information. Dr. Dudgeon is the acknowledged leader of the new school forces in London, a position which his years, his scholarly attainments and discretion eminently qualify him for. In the recent contest with the old school in the *London Times*, the bell wether of the Homeopathic flock fought a valiant fight, and himself and confreres scored a signal victory which already gives evidence of bringing forth good fruit and which is generally recognized as the seed sowing for a long harvest.

Dr. Dyce Brown is one of the editors of *The British Homeopathic Review*, a most excellent journal, his colleague, Dr. Pope, living in Grantham, eighty or a hundred miles out from London, while Dr. Clarke wields the helm of the *World*. Both of

these journals are well conducted and are well worthy of patronage from across the water. The *Review* is the weightier of the two, while the *World* is probably the newsier and more chatty. Drs. Pope and Brown are men of middle age ; Dr. Clarke is quite a young man.

Hughes, of Pharmacodynamic and cyclopedia of Drug Pathogenesis fame, lives at Brighton, on the south coast of England, and it has not been my pleasure to meet him on his native heath. He was present at a recent meeting of the British Homeopathic Society, held in the city, but, most unfortunately, I had no knowledge of the meeting until after it was a thing of the past. It is hardly necessary for me to say that the missing of this session was a very great disappointment.

With Dr. MacLachlan of the *Counselor*, I visited

THE LONDON HOMEOPATHIC HOSPITAL while in the city and was much pleased with what I saw. The building is a thoroughly substantial three story and basement brick building, centrally located, capable of accommodating sixty patients, and it is quite full all the time. The resident physician, whose name I do not at this minute recall, kindly escorted us through all the wards and showed us a number of very interesting cases, both medical and surgical. As is usually the case in Homeopathic hospitals a number of exceedingly tough cases that had been through the allopathic grist and had hardly escaped with their lives, formed a part of the complement under treatment, and, as is also usually the case under these circumstances, marked improvement was affirmed to by all of them. The hospital is well arranged, well managed, and is a positive credit to our interests in London. It is a pleasure to note that a very considerable sum has been raised to improve and enlarge the hospital and ere many years shall have passed our friends will

be in the proud possession of a very fine institution.

The London Homeopathic School of Medicine is not actively engaged in work at the present time.

THE AFFAIRS OF MEDICINE IN ENGLAND are so completely under the domination of the old school, that a Homeopathic school with all the powers and privileges properly pertaining thereunto is not a possibility. The degrees which are recognized by the College of Physicians and Surgeons, a kind of gilt-edged secret society examining board, are limited to a very few institutions, and to those which this institution itself grants, so that a separate Homeopathic College is unnecessary and could get no fair showing. Every Homeopathic practitioner in England has had to have an old school examination at the hands of an old school examining board before being allowed to practice a system entirely different from that which he was educated for and examined in, and so long as this condition of things obtains, it is not likely that Homeopathy will have a large number of students—enough to keep a separate College in existence. The result is that the English Homeopathic students study the new system on the sly, or quietly at least, and dig out its kernels of rich fruit without the help of an organized teaching corps.

In passing, it is well enough to remind those readers of *THE JOURNAL* who favor the Examining Board plan of regulating the affairs of medicine that the English system—the one some of our short-sighted men think an acceptable one—is just what the old school of free America would fasten upon our necks. Beware of it. It is full of danger. Entrust the licensing power to the Colleges and regutate them; but profit by the condition of affairs in England, and

SHUN THE EXAMINING BOARD
as the sailor in a storm shuns the rock.

To embrace it means simply to allow ourselves to be throttled by an enemy as unrelenting as designing and treacherous.

Under the circumstances surrounding our brethren in England they have done and are doing remarkably well, and they deserve great credit for the fight they have fought and the battles they have won. Were England as free a country as is America, such pluck and energy would have given to Homeopathy a grand position on the British Isle.

That Homeopathy is in growing demand among the people of London is evident from the number of branch Homeopathic Pharmacies to be seen in different portions of the city. Besides the well known establishments of Epps and of Gould & Son, I noticed a number of smaller pharmacies in semi-suburban portions of London, and my attention was also called to the fact that nearly every drug store I saw had its sign out—

“HOMEOPATHIC MEDICINES ON SALE.”

Certainly this would not be the case were not the system growing. Only an active demand for Homeopathic treatment would prompt the druggists to announce our medicines for sale, and the fact that this announcement is to be seen at nearly all the drug stores in the residence portions of the city at least, proves conclusively that the statement so often made by the Old School of America that Homeopathy is dying out in Europe is emphatically false so far as London is concerned. Given but half a chance and our system would undoubtedly prosper over here as positively as it has prospered in our country, where the fittest is allowed to survive.

It was your correspondent's pleasure to attend a spread, set by Dr. Dyce Brown, of the *Review*, a few evenings before I left London, at his elegant residence on Portman Street, on which occasion a number of distinguished medical gentlemen were present. Besides our host there

were Drs. Dryden, S. Hahnemann, a nephew of Samuel Hahnemann, Clarke, of the *World*, Fischer, of Australia, MacLachlan, of the *Counselor*, Fellows, of New Orleans, Halsey, of Boston, and the writer, and a most enjoyable evening was the result. Of Drs. Brown, Dudgeon and Clarke, I have already spoken. Dr. Fischer, of Australia, is quite an elderly gentleman who has spent several years in the Pacific's chief Isle, and he reports a commendable progress for Homeopathy in that far off country. Dr. Hahnemann is past middle age, and enjoys a lucrative practice in the north of London. His appearance, speech and deportment are quite those of the German Homeopath who believes in his system, heart and soul, and practices it conscientiously. It was a real pleasure to meet the nephew of his uncle, our founder, and to grasp by the hand a lineal descendant of the genius who did more to redeem humanity from the thralldom of barbarism in medicine than all the therapeutists for centuries past. Drs. MacLachlan, Halsey, Fellows and the writer completed the company and formed a merry young quartet who did good justice to the gastronomic part of the feast, and I speak for America when I say that the evening was socially, professionally and gustatorially a pronounced feast long to be remembered with pleasure.

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ON THE CONTINENT.

Upon leaving London our course took us via Harwich to Antwerp, thence to Brussels, thence to Cologne, and up the Rhine to Wiesbaden. This was the first point reached which has any medical significance. Its hot springs have been celebrated for many generations and are much frequented by patients afflicted with rheumatism, glandular and skin affections. The water bursts forth in considerable volume from crevices in the rocks at the foot of a hill of several hundred

feet elevation above the surrounding country, at a temperature of from 95° to 160° Fahrenheit. It is well charged with the carbonates and phosphates, is decidedly pleasant to the taste, and is reported as being quite effective in the treatment of the ailments for which it is prescribed. It is slightly saline and contains some sulphur. Wiesbaden is pleasantly located at the base of the hills three miles to the north of the Rhine and in the midst of a fine fruit growing country. It is a bright and attractive city of about 60,000 inhabitants with wide avenues heavily shaded, pretty parks, excellent hotels, handsome private residences and fine public buildings. As an inland watering place it has few rivals and no superior in Europe.

* * * * *

From Wiesbaden we went to Frankfurt-on-the-Main and thence to Heidelberg. The latter point, a town of about 15,000 inhabitants, is the seat of a University nearly or quite five hundred years old, which enjoys great distinction among the teaching institutions of the world, and connected with the University is a

MEDICAL SCHOOL OF NO LITTLE CELEBRITY.

Paul Erb is connected with this school and so is Czerny, one of the greatest surgeons of Europe. It was my pleasure to meet Prof. Czerny, whom I found to be a most courteous gentleman, always glad to meet American physicians and to extend to them the privileges of the hospital with which he is connected, a large and splendidly arranged, equipped and patronized one. He speaks English fluently—an advantage which visitors not over well acquainted with German will appreciate—and it is not difficult to conceive that the Heidelberg school is a good one for American students in surgery, desiring an experience abroad, to attend. The clinics are varied and embrace every form of surgical disorder, and it is

possible for the student to get into very close relation with the cases. I saw a number of exceedingly skillfully performed operations in Heidelberg, and regretted that our plan of travel did not admit of a stay there sufficiently long to enable me to enjoy the hospital advantages for a considerable length of time.

* * * * *

From Heidelberg we ran down to Baden Baden, another celebrated German watering place and the most fashionable of all the interior summering springs of Europe. The town has about 15,000 inhabitants, is most beautifully located at the foot of a range of hills, covered by the dense, black forest of southern Germany, and is one of the most delightful spots in the German domain.

ITS SPRINGS BURST FORTH

from the hills in larger volume than at Wiesbaden, but it is not claimed for them that they possess special medical properties to any marked degree. They are slightly alterative and somewhat laxative though not as much so as the waters of Wiesbaden or of Carlsbad. For bathing purposes the waters are very delightful, however, and it is a real treat to indulge in a Baden Baden bath, whether plain or Turko-Russian. Most elegant stone and marble bath houses have been erected on the site of the springs and 'tis the enjoyment arising from the liberal use of these that brings a large number of the most fashionable people of Europe to this pleasure-seekers' Mecca every summer. High-livers, corpulent people and Bright's disease victims come to Baden Baden, and so do the swells and bloods of all Europe. At one time it was the gambling rendezvous of fashionable Europe, but this is broken up now and the little city is quite respectable and altogether lovely, and a most delightful spot for the tourist to spend a few days in the height of the season.

From Baden Baden our course lay through Nuremberg, one of the quaintest cities of Europe, to Linz, a point on the Danube, and thence by steamer down the stream to Vienna; but on arrival at Nuremberg we deflected from the above course and ran up to Carlsbad, the most celebrated of all medical springs, going thence to Vienna by rail.

CARLSBAD IS TO THIS COUNTRY

what Hot Springs, Arkansas is to the southwest, only more so. It is the place where people go for the effect of the waters and for naught else—an unattractive, uninviting and altogether uninteresting place, outside of its medical properties. The town numbers about 13,000 inhabitants, and is a long, narrow, winding and dirty place, settled down in a very narrow valley between precipitous mountains twenty-five hundred feet high, on both banks of an uninteresting and almost waterless creek bed. To the principal hotels the ride by "bus" is nearly two miles, over rough and dusty streets and through several of the worst parts of the town which is none to clean at best. The natural location of Carlsbad is romantic enough and were the degree of enterprise and care bestowed upon it that is manifest at Wiesbaden and Baden Baden, it would be a most charming spot.

As it is, it is in many respects repulsive, and the Bohemian carelessness and filth doubtless deters many people from going to Carlsbad who would otherwise be attracted hither. The annual pilgrimage now amounts to about 3,000, of which it is said nearly 1,000 are Americans. This number includes only those who go there and register for the baths, and does not take in the thousands of tourists who stop for a day or a week only. The baths are under municipal control and a poll tax is imposed upon all visitors who stay more than a week—this in addition to the

regular price of the baths—the tariff for which is not on the Cheap John order.

The springs have been known and celebrated for their medical properties for about two hundred years. There are several of them bursting forth from the almost dry creek-bed, and from the foot of the mountains, *one of them spouting upward* to a height of from fifteen to thirty feet, at a temperature of 190° Fahrenheit. Other springs vary in temperature from 90° up to the heat of the chief one. Great volumes of steam cloud the atmosphere in the neighborhood of the springs and saline incrustation from the waters, crystalize in large quantity at their mouths. The water is so heavily charged with the chlorates and carbonates that the chambers of the springs have to be probed and scraped out every three or four months to keep them from closing up. Several times this has occurred and new openings have formed in localities endangering the safety of business blocks and dwellings. Several factories do a thriving business purifying this salt and shipping it over the world for laxative purposes. Magnesia and Sodium Chloride enter largely into the chemistry of the waters and drank hot on an empty stomach it causes great activity of the intestinal tract, for a short while. Atonic dyspepsia, chronic constipation, torpor of the liver, rheumatism, gout, neuralgia, and the ordinary skin affections are those for which the people go to Carlsbad. Paralysis, heart causes, whether depending upon kidney disease or not, incipient brain troubles and lung patients do badly there and should avoid it. It is said that too free use of the water induces local congestions in many instances and warnings to that effect are freely noted in the printed matter distributed at the bath houses. The Homeopath will readily understand that congestions are possible where a large amount of *magnesium*

sulph., or *magnesium mur.*, enter into the analysis of the waters and will appreciate the propriety of the warnings.

The Carlsbad bath consists of a bath in an ordinary shaped but unusually large metal bath tub, at such temperature as the attending physician shall prescribe, for it is announced with positiveness that no one should undertake treatment without the advice and directions of a local physician. Of course the Homeopath who sends his patients there will recommend Kafka, the son of his father. But the American Homeopath who sends people to Carlsbad, should be court-martialed from the profession. Give *Silicia*, *Natrum Mur.*, or *Magnesium Sulph.*, as the case demands, simple but nutritious diet and plenty of out door exercise as is done there and they will be spared the infliction of a banishment to Carlsbad,

"Where every prospect pleases,
And every man is vile"

I will next write you of Vienna and Paris.

C. E. F.

Medical Properties of Vegetables.

The following information may be useful to some at this season of the year, if not new to many:

Spinach has a direct effect upon the kidneys.

The common dandelion, used as greens, is excellent for the same trouble.

Asparagus purges the blood. Celery acts admirably on the nervous system, and is a cure for rheumatism and neuralgia.

Tomatoes act upon the liver.

Beets and Turnips are excellent appetizers.

Lettuce and cucumbers are cooling in their effects upon the system.

Onions, garlic, leeks, olives and shalots, all of which are similar, possess medicinal virtues of marked character, stimulating the circulatory system and the consequent increase of the saliva and the gastric juice promoting digestion.

Red onions are an excellent diuretic, and the white ones are recommended to be eaten raw as a remedy for insomnia. They are a tonic and nutritious.

A soup made from onions is regarded by the French as an excellent restorative in debility of the digestive organs.—*Sci. Amer.*

• • Surgery • •

Illustrative Cases In Orifical Surgery.

MILTON J. BLEIM, M. D., SAN ANTONIO.

"The proof of the pudding's in the eating." This homely old proverb contains much truth. If practical tests, if personal experience do not substantiate the claims of orifical surgery, let it be relegated to the limbo of oblivion. Let me not be understood as claiming invariable success; as with other methods, success is largely a question of the personal equation; one man will succeed where another fails. Especially is this true where much depends upon manual skill. But if the theory of the orifical causation of chronic diseases lead to the cure of even a few sufferers, thrice blessed boon is it to those few. As proofs of the value of orifical surgery in curing various chronic affections, allow me to record some typical cases:

Case 1.—Eczema of the Leg:—The first case is of that class who are absolutely unconscious of any local trouble and in whom the results are therefore more striking and unexpected. Mr. L. M., aged about forty-five, presented himself to my notice while at the Hot Springs, Dakota. He came there in the hope of finding relief from a very painful and troublesome eczema of the left leg. While trying the waters he desired of me a prescription for stomach and head symptoms. I then learned his story, which briefly was as follows: When a boy of eighteen he first became affected with eczema of the left leg; it was his opinion that the cause lay in red dyed stockings. From that time on he suffered more or less with the eczema. The present attack dated back two years and had been constant to this time. For the last year he had been obliged to

abandon business, and was occasionally confined to his bed for six weeks at a time. He had received every treatment available, including the care of a skillful homeopathic physician. Mr. LeM. looked the very picture of ruddy health; on the closest questioning I could not elicit any abnormal symptoms beyond the local suffering, except this, that when the leg was better he suffered with headache and great flatulency of the stomach; it was for the relief of these symptoms that he presented himself; Lycopod 30x relieved promptly. On inspection the leg was found greatly swollen from the toes up to the knees. The surface was moist, of a fiery, shiny redness, exceedingly painful, and the epidermis macerated and eroded. The eruption was creeping up the thigh and scattered patches appearing also on the right leg.

On account of its obstinacy and apparent incurability, I determined to investigate the case from an orifical standpoint. Upon searching for symptoms, I found absolutely none. He was perfectly well sexually, had never had any vesical or urethral disease. His bowels had always been regular, nor had he ever had the slightest trouble calling his attention to the rectum. Surely, though, here is a case which will prove an exception to Pratt's proposition. But I was bound to go through with it, and so received permission to make an examination. I found the spincters very rigid, and on expanding the trivalve speculum, to my astonishment masses of internal piles rolled into the lumen, completely filling it. Other irritation was there none; not even one member of the ubiquitous and universal *pocket* family did I find.

I confess it—my faith was weak. So ridiculous was the idea of any relation between these piles and the eczema that I could not help laughing with the patient at it. But I put it this way: "If you are

willing to undergo the operation, I am willing to perform it; if it fails to cure you, you are under no obligations to me." He consented.

The operation performed was the simple one of Pratt, which consists in lifting the apex of the tumor with a tenaculum and snipping off a longitudinal segment of the mucous membrane, with the curved scissors; then, rolling the dilated veins out through the slit, shaving them off at their base, ending by thoroughly dilating the sphincters. The patient showed his real vitality by the way the operation affected him; he was thoroughly collapsed and only after some hours did the circulation regain its balance.

I determined to let Mr. LeM. and his good wife be the first to call attention to the leg. The next morning Mrs. L. did so and to my joy and surprise I found the fire and the swelling gone out. The color was dull and the integument was wrinkled from the stretching it had been subjected to. Henceforward improvement was noted by the day. The pain disappeared with the swelling; but I never had had a patient who suffered such intense pain at the seat of the operation. It was necessary repeatedly to give hypodermic injections of morphia. I soon found that a paroxysm of pain indicated the pressure of feces; after relieving the bowels there was complete comfort until another accumulation demanded exit. After satisfying myself that the improvement was due to the operation, I ordered a protective dressing for the leg of the benzoated oxide of zinc ointment.

In precisely two weeks and a half the leg was perfectly well with the exception of one moist spot on the external aspect, where the original trouble started. The rest of the leg was normal in size and was covered by healthy epidermis. He was able to stand and walk considerably, and scattered patches had disappeared. To

say that we were all astonished and happy would be drawing it mild.

At the end of the time indicated, my patient prevailed upon me to let him go home. I soon received reports of complete restoration. Best of all, a year after his recovery he writes me that he remains in perfect health, both locally and generally. This is a sufficient answer to those who claim that the effects of the work are not permanent. I never treated, or even examined the rectum after the operation. Mr. L. offered his name and address, so remarkable does he consider his recovery and the method of it; but I am not advertising, and so refrain.

R. R. Surgery, Haematuria and Pruritus Vulvae.

READ BEFORE THE KENTUCKY HOMEOPATHIC STATE SOCIETY, BY O. H. BUCK, M. D.

For special reasons I have been unable to prepare an essay for this occasion; therefore I may be pardoned for reciting a few cases in my practice which may open a way to discussion and be profitable to all.

CASE NUMBER ONE.

An engineer was brought to my office having been thrown from his engine.

Upon examination I found a compound fracture of the *skull*, evidently having struck the corner of a tie, as the depression was triangular. I thought it necessary to operate at once, and summoned assistance. Before getting ready to operate, two or three physicians called. Some were of the opinion that an operation ought not to be attempted, at least until there was reaction. I very much doubted his ability to react with the amount of pressure existing. Extremities cold, pulse forty per minute, stertorous breathing, vomiting bloody mucus every few minutes, pupils largely dilated, per-

fectly unconscious. I was of the opinion that no time should be lost in operating.

As the wound was filled with dirt, of course it was cleansed and scalp dissected back to allow plenty of room to trephine. The fracture being triangular, the trephine was placed at apex of the triangle and then carried through the bone, both outer and inner table. The entire fractured bone was removed, being at least three-fourths of an inch on each face. Fortunately the dura mater was not wounded. There having come under my observation one case in which silver was placed underneath the scalp to protect the brain, causing sufficient irritation to require its removal, and in view of there being but the above mentioned surface exposed, the wound was then closed except open for a drain tube, using silk sutures. There were two other cuts through the scalp about three inches long, which were sewed and all healed by first intention. Not until the lapse of about thirty-six hours was there any sign of reaction, after which the temperature of the head rose very high. He was unable to swallow; I therefore kept bags of ice constantly applied to his head. Although very restless he remained perfectly unconscious for six days, at the expiration of which time, by a trick known only to my assistant in the case, I was superseded. I however was kept posted regarding him until his recovery which took place in about five months from the time of injury.

CASE NUMBER TWO.

Early one morning I was sent down the K. C. R. R. to attend a conductor whom it was said had been hit by an overhead bridge. I found him unconscious, with hemorrhage from nose, eyes and ears. Pulse very irregular, ranging from forty to fifty per minute. Extremities cold; respiration labored. I at once administered hypodermic injections of whiskey,

which had the effect of restoring to some extent the irregularity of pulse, and raising temperature of extremities.

Having made a very thorough examination of his head and finding no trace of fracture, not even a abrasure of the skin I at once said there was none—simply a case of violent concussion. His home being in Covington, I took him there and placed him in care of his family physician, and a daily record was kept of his case. He steadily improved for a few days—even got so he could walk out on the street. In about two weeks he began complaining of violent headache, growing gradually worse until after several days of violent delirium he died; which event occurred about three weeks from time of injury. Post mortem revealed an extensive fracture, almost entirely encircling the occipital bone, but wholly of the inner plate, in no place extending to the outer. Both in ante mortem, and post mortem reports the statement was made that he was hit upon the head by a bridge. I asserted then and claim now that he was not, because, as I stated in court (his administrator having sued for damages), no one could be hit on the head by an over-head bridge without there being some abrasion of the skin or an indenture of skull; particularly as it was in evidence that the train was running fifteen miles an hour when the accident occurred.

Although not called upon to prepare an article in this particular department, I wish to report two cases which to me have been of more than ordinary interest. Not so much on account of treatment, as by reason of there being in the first instance the very worst and in the second the only one I ever saw.

CASE NUMBER ONE—HÆMATURIA.

Mr. W—, aged seventy-two, light complexion, nervous temperament, family history the very best, was never since

childhood sick in bed, has had remarkable good health all through life. Within the past ten or twelve years I have at times prescribed for him for an abnormal flow of urine, but with none of these attacks has the urine been abnormal, either in weight or reaction.

Some weeks ago, with no premonition whatever, he began passing blood from the bladder. A physician was summoned but there being no improvement in his condition, a change in physicians was deemed wise. I saw him for the first time two weeks after the trouble began. I learned that in each twenty four hours there was voided at least five pints of blood and urine. When I first saw him I was compelled to introduce a catheter and with an aspirator syringe draw the clotted blood from the bladder. I had to resort to this measure but once, although I several times saw him pass large streams of clotted blood before any sign of urine, and then it would be so thoroughly incorporated that it could not be told of which there was the most, urine or blood. Bear in mind this condition had existed with little or no change, for at least two weeks. I learned from the family that the principal thing taken in the way of treatment was ergot. I therefore concluded to loose no time in giving what he had undoubtedly had enough of.

He said he felt as well as he ever did in his life, not an ache or pain, no tenderness either over kidneys or bladder; appetite good; bowels acting every day; slept well at night, except when getting up to urinate, which occurred more frequently at night than in the day. No pain or burning when passing urine; only an abnormal urging at the time. I confess I was entirely at sea as to the remedy, in fact believed there was no remedy on earth that would react the case and so informed the family. The appearance of the blood solely determined the remedy.

Everything passed was as black as ink. I knew or know of but one remedy that has this characteristic in bladder or kidney trouble, and that is Terebinthina. I gave it to him in drop doses every hour, with the gratifying result of seeing his condition change for the better, in less than twenty-four hours. In view of his having lost so much blood, I gave him two drop doses of china every four hours. After continuing the Terebinthina for forty-eight hours, I administered it at intervals of three hours. In just six days from my first visit, his urine became perfectly clear of blood, having taken nothing but these two drugs; at the expiration of which time there was a slight mucus discharge just before urine began to flow. I then gave him Uva Ursi, which cleared the whole trouble up, and now at the expiration of nearly a month, he remains in his usual health.

PRURITIS VULVÆ.

Some months since a lady came to me complaining of an intolerable itching in the vagina. This state of affairs had continued with more or less regularity for two years. The itching was most severe just before voiding urine. Not even suspecting the cause, I took it to be pruritus vulvæ, and so treated her for some weeks with not the slightest benefit. After having failed so often in my prescriptions, I persuaded her to submit to an examination of the parts. I could find no trace of an eruption of any sort. Each time she called there was no variation in her expression, "it feels as though there were worms crawling in the vagina." After several weeks of foolishness I came to the conclusion that it was a parasite of the kidney, and requested her to bring me some urine to test. Although this condition had existed for some two years, she had never noticed what was easily discovered when holding it between you and

the light ; the urine was literally loaded with what I pronounced *Strongylus Gigas* ; although it is said that but few cases of this parasite have been reported in man. Her husband being a traveling man, she remained under my observation but about six weeks after the discovery of the parasite. I regreted her departure as I wished to continue my experimenting. The well known reputation of *Terebinthina* in removing *Ascarides* induced me to try it in this case. I gave her three drops every five or six hours. In the course of twenty-four hours they increased many fold, and so continued several days. After which they gradually decreased to a less quantity than when I first made the discovery. They varied in length from one to four inches ; in diameter about the size of a small hair and blood red.

Hahnemann's Organon.

BY P. DIEDERICH, M. D., KANSAS CITY, KANSAS.
READ BEFORE THE KANSAS STATE HOMEOPATHIC MEDICAL SOCIETY, AT EMPORIA,
KANSAS, MAY 2, 1889.

This remarkable volumn contains the principles and doctrine of Homeopathy. I consider the whole contents under two heads: First. The essentials, and 2nd, the non-essentials to Homeopathy. Essentials are: 1st, The Law of *Similia Similibus Curantur*. This is the corner-stone of the whole system. 2nd, Medicines should be proved upon healthy persons, to learn their positive effects. 3rd. The single remedy should be administered in sickness. 4th. Medicines should be potentized in order to cure in a mild and pleasant manner. (This rule has a few exceptions.) 5th. The totality of the disease-symptoms constitutes the disease and the removal of all the symptoms is necessarily followed by health. 6th. The first duty of the physician is to ascertain the malady. He must make a most thorough examination, in order to get

all the symptoms and signs of disease. 7th. The second duty of the physician is to make himself acquainted with the positive effects of medicines. This he learns through a thorough study of the Homeopathic Materia Medica. 8th. The *third* duty of the physician is to know how to apply the medicines. The dose should be large enough to make an impression upon the system, but not too large, so as to create a violent or dangerous aggravation of the disease. A repetition of the dose may be necessary in order to make an impression upon the system or to establish a permanent cure. 9th. To understand all these and act intelligently upon it, requires a great deal of earnest thought and study, and he who not willing to be a lifelong student of medicine should not enter the ranks of Homeopathy, for he will be no successful practitioner, and no honor to the Homeopathic profession.

The following contents of the Organon are non-essential to Homeopathy. 1st. Theories in regard to the *prima causa morbi*, the original cause of diseases. It is interesting and profitable to follow closely the investigation in regard to the ætiology of diseases, but to Homeopathy it is not of vital importance and never will be. 2nd. That diseases were only dynamical manifestations, and that the effects of medicines were only of a dynamical nature are mere assertions. The belief or unbelief in these speculations is not essential to Homeopathy. 3rd. To regard syphilis, sycosis, and psora as the parents of *all* chronic diseases, is a theory of Hahnemann, which in the light of modern pathology cannot be substantiated. The theory is entirely non-essential to Homeopathy. 4th. The theory in regard to the development of the curative power of medicines through an *unlimited* potentization. This theory has brought a great deal of deserved ridicule and contempt upon Homeopathy. (Probably

Hahnemann had no idea, that potentization should go on forever, positively no stop to it, but some of his followers interpret his teaching that way.) The belief or non-belief in this theory is non-essential to Homeopathy, but the belief in it is a pathognomonic symptom of every visionary eccentric Homeopathist. 5th. To believe that all external treatment is injurious and that positively nothing else should be done besides internal medication is non-essential to Homeopathy. External applications are very beneficial sometimes, and he who for principle's sake never uses any, surely neglects his duties as a physician.

518 Minnesota Avenue.

THE FUNCTIONS OF THE CEREBELLUM.—"Is the cerebellum an organ for the storage of cerebral events which have become automatic? Do we first of all receive with the cerebral cortex and then practice with the same brain-bark, and afterward relegate to the cerebellum, as to a limbo, those things of which we are so tired of being conscious? Are all performances of the cerebral conscious cortex acts, and those of the cortex of cerebellum unconscious? And so might questions, more or less unanswerable, be postulated without end. The functions of the little brain are scarcely known at all; even the dependence of the equilibrium on its existence may be called in question on the data supplied by pathology. It is perfectly certain that no obvious signs of nervous disease need exist when the lateral lobes are the seat of even extensive mischief. Some regard the cerebellum as the terminal organ of all visceral sensation, and on this assumption it has been thought that the curious perturbations in visceral epilepsy are to be ascribed to preversions of the vitality of the gray matter of the little brain. Anything is possible for the cerebellum. The most gifted imagination might guess strange things, yet ophthalmology could perhaps find exact counter parts."—*Lancet*.

The Western Exchange Bureau: Physicians, dentists' and druggists' locations bought and sold in all parts of the United States and Canada. Assistants, substitutes and partners furnished. Send two-cent stamp for the *Monthly Bulletin*. Sample copy of the *Medical News* free. Address H. A. Mumaw, M. D., Orrville, Ohio.

• • Materia Medica • •

Salol and Passiflora incarnata

READ BEFORE THE OHIO HOMEOPATHIC MEDICAL SOCIETY, BY DR. MANN, MAY, 1889.

My reasons for presenting these unproven remedies for the consideration of this society, cannot be better expressed than in the words of the venerable and eloquent Wm. T. Helmuth, when in his "Sectarianism in Medicine" he said: "There are those, who, while they believe implicitly in the formula *Similia Similibus Curantur*, as covering the widest field in therapeutics, are of the opinion that it cannot always be applied; first, because the *Materia Medica* is imperfect, and secondly, because our knowledge of it often insufficient—who believe that there are methods of curing disease other than the Homeopathic—who consider it necessary for the physician to understand as perfectly as the short span of his life will permit the varied collateral branches of medical science—who regard the welfare of the sick and the alleviation of the suffering above mere adherence to a principle, and hesitate not if they are unable to find the similitum to prescribe what best they can obtain from the experienced of any other school.

Salol is a white crystalline powder, almost insoluble in water, nearly tasteless, and has a faint aromatic odor. It is soluble in ether, petroleum; alcohol, fatty oils, etc. Melts at 43° C; 110° F. It is composed of 40 per cent. carbolic acid and 60 per cent. salicylic acid. The advantage of salol over salicylate of soda, for which it is prepared as a substitute, are dependent on its almost insolubility in water and the juices of the stomach; consequently the better borne by weak and irritable stomachs, and on

the ease and completeness with which it is decomposed after passing into the duodenum, where it comes in contact with the pancreatic juice, and is broken up into its constituents, salicylic acid and phenol. It is eliminated from the body as sulpho-carbolic acid and produces carbol-urine.

Salol is an antiseptic, and an antipyretic in large doses, zss, or more. The antiseptic property of salol quickly removes the *offensive* odor of the breath attending the indigestion of patients suffering from severe rheumatic pains.

I wish to call attention to the action of salol in *Articular Rheumatism*, and especially *Rheumatic Neuralgia*. It is not in chronic but *acute* and *acute aggravations* of *chronic cases*, or *comparatively recent cases* of rheumatic affections, where salol gives the best results. One or more joints may be affected, either with or without fever and swelling. The action of salol is not precise or reliable in muscular rheumatism, as in articular affections or rheumatic neuralgia, sciatica, etc. Tinnitus aurium may be produced by large doses. Relapses may occur as after any other treatment. Salol does not seem to cause any abnormal action of pulse or respiration.

Dose—five grains to one-half drachm. I generally give five or ten grains every hour until better, then increase the interval between doses gradually. Small doses of salol are too *slow* and *uncertain*; better give twenty grains than give one grain. a thorough and lasting effect is attained by continuing the administration of salol in decreasing doses for several days after all pain has ceased.

Passiflora incarnata, *Passion Flower*.—natural order, Passifloraceae. There are three varieties in this family; *P. coerulea*, *P. incarnata*, *P. lutra*; genera 12, species 210, chiefly natives of tropical America.

A tincture is prepared by our Homeopathic pharmacies in the ordinary manner.

Passiflora seems to be especially adapted to derangements or disturbed conditions of the nervous system, as neuralgia, tetanus, tetanus neonatorum, chorea, insomnia or sleeplessness.

For that nervous, restless, excited or wakeful conditions found in so many affections, passiflora has a wonderfully soothing effect, generally producing a quiet, restful sleep, from which the patient awakens refreshed.

I have used recently, with gratifying results, the passiflora -o- (five drops in the evening, repeated if needed) to produce sleep in a little girl eight years of age, who was suffering from chorea so marked as to greatly disturb her sleep, on account of the nervous excitement and continued motion. Passiflora is not a narcotic, and never stupefies or overpowers the senses.

It is said to be almost a specific for tetanus in horses. I have used the tincture in from one to ten drop doses, and the lower attenuations. This remedy certainly deserves a proving.

[After reading this article I prescribed Passiflora, five-drop doses in a case of Tetanus in a horse, with excellent results, in eight hours. Dose was repeated every hour.—ED.]

MEDICAL JOURNALS.—Dr. W. W. Dawson, in his presidential address to the American Medical Association, referred thus to the Medical journals:

Medical journals, metropolitan and provincial, are the heralds, the vanguards of medical progress, the exponents of professional culture. They are closely associated with the colleges in education and in post graduate instruction. In them appear the best thoughts of the best men; they constitute the great forum of intellectual combat; upon their pages pretension is analyzed and estimated, and worth recognized; that which is new or original is endorsed, or rather encouraged; it is only the plan, the original investigation which is endorsed; the results, the conclusion must be subject to the crucible of test and trial.—*Courier-Record*.

Some Allopaths can appreciate the good work of the *Medical Journals*.

• • Practice • •

Heat as a Therapeutic Agent.

BY J. A. KIRKPATRICK, M. D., ANTHONY, KANS.
READ BEFORE THE KANSAS STATE MEDICAL
SOCIETY, AT EMPORIA, KANSAS, MAY 2, 1889.

Of all agents I know of none are more important than heat. Its influence has been felt since the beginning of organic life. Long before either vegetable or animal life it must have existed. According to geological science it was a potent factor in the formation of this earth. It would be interesting to consider heat from a physical or physiological standpoint, but time and space forbid.

The nature of heat is not known. Some scientists consider it as molecular motion, others as an immaterial substance. It seems to me the latter is preferable and more analogous to other real entities such as, air electricity and even sound, which is thought to be a substantial entity by many to-day, as real as the odor from the rose or the gases given off in combustion.

Therapeutics is defined by Dunglison as; to wait upon, to alleviate, to attend upon the sick. It also means to give the *modus operandi* of medicines. I shall confine myself to the alleviation of the sick, and leave the *modus operandi* for others who love to dwell on mysteries more than I do.

Heat like drugs has a dual action. It will destroy or restore life. While the most destructive to animal and vegetable life, no living thing can exist without it. Heat and vital energy cannot be separated, in fact, vital energy is measured by the amount of heat generated in the operations of the functions of life.

No agent will penetrate the whole system so quickly and so thoroughly as heat. It might be asked, why is heat especially applicable in the treatment of children.

I answer as follows: 1st, Children must be treated on general principles, largely depending upon objective symptoms. Heat comes the nearest being a panacea for every ill, of anything I know of.

2nd, I think I am safe in saying that all fatal diseases are accompanied by some form of congestion. I know of no agent that will so quickly and so permanently restore the equilibrium in the circulation and especially in the capillaries.

3rd, It is always accessible and can be applied in various degrees of intensity and removed when desired. There are many other reasons that might be given. Hawks says, "it is the only stimulant that is not followed by a reaction."

When should we use it?

The same law must be followed in the use of heat that we observe in the selection of any medicinal agent, "*Similia Similibus Curantur.*"

We must assist nature in her efforts to restore health. We believe that fever is as necessary to correct certain derangements, as a diarrhoea would be in evacuating the bowels of some poisonous accumulation. So whatever assistance we give, must be on the line of nature in her operations.

All congestions, local or general are followed by inflammatory action, hence we must apply heat, the higher the inflammation, the more intense the heat applied. Some who have not made such application might think this more theoretical than practical. But speaking from my own observation and experience, it only needs to be tried to be proven. All diseases marked by a tendency to congestion will be benefitted by the application, I care not where the congestion is located, or what caused it, heat, if applied early, will relieve it.

I never treat a fever patient who is threatened with local inflammation with-

out application of heat, either locally or generally. And with what success, I will say, I have never lost a patient from Remittent, Intermittent, Typhoid, Typho Malaria or Pneumonia, where I was called in time. Only one case in which I was called too late.

How apply it?

The mediums used in applying heat may be water, steam, air, brick, sand, salt, meal, oats, bran, poultices of various kinds, plates, stove lids, flat irons, flannels, etc., anything that is hot. Don't wait to heat something if there is anything already heated, use it.

Water is the most desirable medium of any. It may be put in fruit jars, jugs, rubber bottles, glass bottles, and apply locally.

It may be applied generally by a hot bath, covering with blankets to hold the steam. Water should not as a rule be used over 110° Fahr., although it may be run as high as 115° Fahr.

Steam is a good medium, but not so easily regulated in temperature as water.

Air is the best medium for the application of heat to cavities, such as the lungs in bronchitis, also in the rectum to relieve an obstruction, or severe colic; air in large quantities may be injected per rectum and reach some more remote portion of the bowels. Air may be breathed into the lungs at 115° Fahr. and is claimed by many to destroy the baccilli of the lungs. From the beneficial effect upon congestion on other surfaces and other tissues, is it not due to the stimulus given to the life principle in the reparative process, and not due to the destruction of germs?

I was called to see a little girl 9 years old. She was taken in the evening with hard chill, followed by fever; two hours after fever rose I was called. She was breathing very rapidly, pulse 120, temperature 104° complained of pain in

in right lung of a heavy aching character, constantly. She was very restless and delirious part of the time. I was not certain of dulness in the lungs, as the liver sometimes lies higher than in others. The air did not enter the right lung freely, crepitant rales could be distinctly heard. I suspected pneumonia. I gave Aconite 3x, in alternation with Bryonia 3x, after a few doses she was still suffering with pain, perspiration began however and there were evidences of improvement. Although suffering intensely, I ordered hot application to cover the whole chest. A rubber bottle was borrowed filled with hot water and applied. In twenty seconds she said she was better, in less than one minute she said the pain was gone. Perspiration became profuse, fever began to subside and two hours from the time I was called, I left her sleeping. She coughed up considerable sputa in the morning, most of which was the brick dust or rusty sputa of pneumonia. When I saw her in the morning, she was free from pain. Temperature 101, pulse 90. The right lung was very sore for some time, otherwise she made good recovery and in one week was able to be out.

Another case, a boy of 16 years. When I was called he had all the symptoms of pneumonia. I gave him Vir. Vir. 3x, and ordered hot water bath or sweat. They gave it, next day temperature same, on inquiry found they had set him in a tub of water with only a thin blanket over him, the folks thought it made him worse, and I did too. I told them how to give a hot water sweat, and they did, he begged to get out, but they kept him in 35 minutes. They sent for me next morning, he was delirious, his mother said he had been, since the bath the evening before. I felt his pulse it was normal. His temperature was normal. I asked him if he felt bad, his reply was, that he wanted to go home. He seemed to know

me but thought he was away from home, said he wanted his clothes so he could go home. I saw him several times during the day, consciousness gradually returned and in the evening he was alright except very weak. The case was a surprise to me, and caused not a little anxiety during the delirium. He made rapid recovery, had no return of fever and recovered from a cough he had had for several weeks.

C. D. CRANK, M. D., officiated as toast-master at the banquet given by the Cincinnati Homœopaths to the members of the Ohio State Society. He introduced the toast, "The Medical Press," with the following :

After an absence of many thousand years Adam returned to look over the old farm. He was amazed at the change, the improvements in farming implements and mode of agriculture. He hardly knew the old place. With heavy heart he wandered into a neighboring city. He was astounded at the great progress, and general advance and diffusion of knowledge. He wandered into an art gallery and marvelled at the paintings and sculpture. He was dazed, and passing out he fainted. They bore him into a neighboring building and sent for a doctor. The old school fellow came--gave him emetic, followed by a dose of Calomel, applied a mustard plaster to his stomach and was about to bleed him when Adam recovered. Taking in the situation he threw his arms about the old doctor's neck, exclaiming : Now I feel at home--your practice is the only thing that I have found just as I left it.—*Medical Advance.*

\$2.00 Money orders, postal notes, drafts, etc., are always in order. On with the good work.

• • Societies • •

Meeting of the Southern Homeopathic Medical Association.

MEETS AT MEMPHIS, NOVEMBER 13, 14, AND 15, 1889.

LITTLE ROCK, ARK., Aug. 15, 1889.

DEAR DOCTOR:—We take great pleasure in announcing to you that the time for holding the next annual meeting of the Southern Homeopathic Association is near at hand. Every effort is being made by the officers and committees to make this the most successful meeting of any in the history of the society. We have the promise of a large attendance. Many eminent physicians outside the Southern territory have signified their intention of being present, and will contribute articles on special subjects.

The bureaux have been well and ably filled, and some excellent papers have already been sent in. They are written upon topics that are of especial interest to physicians practicing in southern climate, and will doubtless draw out interesting and practical discussions.

Memphis is a grand city, and is in every way well adapted to our meeting.

If you would aid in advancing our common cause, and in doing honor to the name of the illustrious Hahnemann, make it manifest by your presence.

W. E. GREEN, M. D.,
H. CRUTCHER, M. D. President.
Cor. Sec'y.

To the Members of the Kentucky Homeopathic Medical Association.

ESTEEMED COLLEAGUES:

Impelled by a desire to do all in my power to prevent the unprecedented interest displayed during our last meeting from flagging in the least, no less than to equally exert my influence in arousing interest in the coming meeting, I have

to-day appointed the Chairmen of the different Bureaux and Committees. May I express the hope that each Chairman so appointed go immediately to work: first by appointing two assistants, and notifying them of such appointment, and second by determining himself, and by inciting his two co-workers to determine that theirs shall be the best report made at the meeting. The success of a meeting is always in exact proportion to the amount of work done by the members in the year intervening between that and the preceeding one. Such work determines the number and value of the papers presented, and the ability displayed in their discussion, as well as the results reported by the various committees appointed to further the interest of the Society and of Homeopathy at large in the State.

If the members will keep these thoughts with them, and begin early to make notes and observations preparatory to their coming papers, and return the titles to such papers to the Secretary so that his programme may be issued early, and members may thus be given time for thought and study upon the subjects likely to be discussed, a good meeting will be inevitable. Members should not leave the search for new members to the "Soliciting" Committee, either, but each member should fix upon some physician eligible to membership and *prosecute* him until he consents to attend the Louisville meeting.

The world and everything it contains, is constantly in motion; societies are like individuals, they must either progress or retrograde, they cannot stand still; let us see that our Society progresses.

How can our progress be prevented? Each meeting is a better one than the one before it, and our next meeting will be in our State metropolis, where facilities for

getting to and from the meetings, and for obtaining good newspaper reports, are unsurpassed. So, fellow Homeopaths of Kentucky, join with me, thus early, in making our Louisville meeting, next May, by far the best meeting in our history. Fraternally Yours,

A. L. MONROE,
President Ky. State Medical Association.

Texas Railroad and Traveling Men's Aid
Association.

OFFICE: OPERA HOUSE BUILDING.

DALLAS, TEXAS.

To the People of Texas:

The Railroad and Traveling Men's Aid Association was organized with the view of raising the necessary funds to place the home for disabled ex-confederate soldiers, at Austin, on a safe and permanent basis.

At the first meeting of this association Cooper Nott was elected Secretary, and Royal A. Ferris, Vice-President of the National Exchange Bank, of Dallas, was elected Treasurer of the Association. The Secretary furnishes subscription lists and blank official receipts to all persons who are willing to assist in raising funds for this enterprise, and all such persons are advised by the Secretary to remit all funds collected, direct to the treasurer, and return the subscription list, when finished, to the Secretary. We have also elected the following Board of Trustees to receive the fund raised by this association, and look after its investment and see to its proper application, viz: Col. W. E. Hughes, of Dallas, Eugene Bremond, of Austin, William Walsh, of Austin, for many years Commissioner of the General Land Office, and Royal A. Ferris, Treasurer, becomes ex-officio member of the Board of Trustees. These gentlemen will see that every cent of the fund raised, is properly applied. The work is being done by all concerned absolutely free of any charge. No man gets a cent for his

services in this work. We now anticipate that every expense together of this association in raising this fund will be considerably less than \$100 ; and we now believe that the total expense will not exceed \$50. A great many good men are acting now in Texas as solicitors for this cause, and contributions to a considerable extent are now coming in to the Treasurer. The Dallas State Fair Association has set apart Thursday, October 17th, as the day of this association at the State Fair, and has agreed to give us for this charity one-half of the gate receipts of that day. The Hon. Wm. Burges has agreed to be our orator for the day, and we will have fifteen minute speeches by several prominent gentlemen, notably Hon. George Clarke, of Waco, Col. W. L. Crawford, of Dallas, Gen'l D. S. Stanley, commanding U. S. troops for Texas, as well as several prominent gentlemen from whom we have not had time for a response.

We have invited all prominent ex-confederates in the south, including President Davis, to be with us on October 17th. We now say to you that we have those disabled soldiers with us ; they have no country to pension them ; they should be taken care of. The legislature of the state, under the present constitution, is powerless to do so. Because of these circumstances, we have undertaken to raise this fund for that purpose. We now ask every man, ex-confederate and other, who has any sympathy for this cause, to take immediate steps to raise what money is in his power, through his own contribution and those of his neighbors, and remit to Royal A. Ferris, Treasurer, and a list of those giving to Cooper Nott, Secretary. We also beg you to present at the Dallas State Fair, on October 17th, and bring with you all your family, and your neighbors and their families, in order to swell the gate receipts of the Fair that day, as we get half of the entire gate re-

ceipts of that day. This is a prosperous year for Texas, and we trust that all persons will help us that are able.

Yours very truly,

WILLIAM ENDERS,
President.
COOPER NOTT,
Secretary.

Homeopathy is Making Great Strides in Public Favor.

PROMINENT MEN WHO ADOPT IT.

Dr. D. H. Riggs, surgeon of the Homeopathic Hospital in this city, and a well known practitioner here for the past ten years, was seen by a POST reporter yesterday and asked if he considered that Homeopathy had advanced in popularity at the Capitol during the term of his professional work here.

"I should say that its popularity has advanced very rapidly," he answered. — "Ten years ago, there were twelve Homeopathic physicians in Washington, while to-day there are thirty-five. This increase is much greater than formerly, when it is taken into consideration that the practice of Homeopathic physicians has increased so that the number of people who receive treatment is greater than the mere fact of the increase in physicians would indicate."

"Among what class of people does the practice seem to be gaining favor?"

"It is among the most intelligent portion of the community that the increase has been made, which I consider an item, of importance. Among the patrons of this method of the treatment of disease are Secretaries Blaine and Windom, ex-Secretary Bayard, Senators Call and Kenna, Assistant Attorney Gen'l Montgomery, and many others. Ex-President Garfield and Chief Justice Waite were both pronounced in favor of Homeopathy during their lives."

"Did any of those you mention show

their preference for Homeopathic treatment when in need of medical attendance themselves?"

"When Secretary Blaine was taken down with an attack of apoplexy, he was treated Homeopathically, and it was by such treatment that his health was recovered. Secretary Bayard was one of the staunchest advocates of Homeopathy when it was not so popular as now."

"Has either the practice of Allopathy or Homeopathy been modified during late years by the adoption of ways of treatment from the opposite method."

"The practice of Homeopathy has not changed, but Allopathy during the past twenty or thirty years has been revolutionized by Homeopathy. Page after page of Ringer's hand book of therapeutics and and several other accepted text-books of the Allopathic school are devoted to homeopathic remedies. It is at times very amusing to see an Allopathic journal take up a remedy as a discovery that Samuel Hahnemann discovered a hundred years ago. We don't object to having them steal our thunder if they would only acknowledge where the thunder came from. Some time ago the Allopathic physicians made quite a furore over somebody discovering the force of nitro-glycerine, when Homeopathic physicians had been using it right along."

"How is the Homeopathic Hospital here succeeding?"

"Very well, indeed. The fact that Congress recognized Homeopathy by making an appropriation for a hospital, &c., was quite a concession. We are now in need of additional room, and will make an effort during the next session of Congress to get an appropriation to build an extension to our hospital building. Seven years ago a Homeopathic dispensary was established here and one year later the hospital was bought and is now one of

the most complete institutions of its kind in this country.

"There is one thing that Homeopathic physicians have noticed of late with shame and regret. The fact that Homeopathy has grown in popularity so rapidly has influenced some Allopathic physicians to come out on our side in name, while in fact they have never graduated from any college except the Allopathic and in their treatment use Allopathic methods and medicine. This is a great misfortune for Homeopathy."—*Washington Post*.

Dr. Riggs is a modest gentleman and stated the progress of Homeopathy in very mild terms. The most surprising feature about the interview is, that any one in this age could be found, who has been so blind to the world's advancement as not to have been aware of the very great strides of Homeopathy. It is an unpardonable *crime*, especially for a man of the *quill*.

Questions Concerning Chicago's Holding The World's Fair of 1892.

PUBLISHED BY ORDER OF THE COMMITTEE ON
NATIONAL AGITATION.

WHAT ARE THE INDISPENSABLE REQUIRE-
MENTS OF AN ELIGIBLE LOCATION
FOR A WORLD'S FAIR.

Are not chief among them abundant supplies of good air and pure water, as well as ample space, accommodation and transportation for all exhibits and visitors, together with convenient access to the greatest number.

Can any fair minded and well informed man pronounce Chicago deficient in a single feature of these essentials?

Confining our questions to cities to cities of over a million of inhabitants, has any other than Chicago, so cool, comfortable and wholesome a climate? Can any offer to millions of visitors in the dog days, equal immunity from sunstroke and disease.

Has any so limitless a supply of fresh air and fresh water as the works now in process of construction insure to Chicago from the great lake which is at once her refrigerator and her fountain?

Has any equal Hotel accommodations and Railroad facilities, with assurance from hotels of no increased charges, and with like assurance that the inland transportation of foreign exhibits will not exceed the cost that would be incurred in the unavoidable breaking of bulk, with extra handling and carting elsewhere?

Has any such city an equally accessible location as Chicago for the great bulk of exhibits and visitors? Is it not obvious that the direct saving to the West of such a central site would exceed, as computed, Fifty Millions of Dollars?

As World's Fairs and National Celebrations have hitherto been held in the extreme East and South, is it not the West's turn now, by the rules of rotation, and by every consideration of comodity and fairness?

Why should not the Farmers of the land, echo the voice of their representative in the Cabinet, favoring the location which is the "center of the greatest agricultural and stock-raising region of the Globe."

Why should not the Breeders of Blooded Stock insist, as they do, on a location affording them hundreds of acres for their proposed display, to exceed all previously held?

Why should not the Lumbermen, the Ironmen, the Miners and Manufacturers of Mining Machinery, and many other industries, join, as they do, in the demand for this central and convenient location?

Why not accede to their united preference offering the amplest space and the greatest facilities for their several exhibits, to enable them to show, as never before, the boundless natural resources of this

country; for instance, our inestimable mineral wealth in the richest conceivable display of ores, and of machinery for their treatment, enlightening our people generally, as well as home and foreign metallurgists?

Why should not all Americans, and attending Foreigners, have an opportunity of judging of the country as a whole, not by mere inspection of its outer edge, but by coming into its body, and witnessing its phenomenal success?

Why should they not all come to its greatest inland city,—a fair in itself,—as a marvelous growth in a few years from frontier camp to a metropolis of immeasurable destiny, and see for themselves whether it is true or false that she is the of the greatest inland commerce of the world; that she has in fact the finest group of business structures, the most extensive park system, the longest and most beautiful drives, including that named after, and worthy of, Sheridan, to be found on this continent; and in the absence of an Eiffel Tower, another structure, the Auditorium, of several times its cost, and incomparably greater utility?

Why is it not peculiarly appropriate that the Columbus Exposition should be distinctly and grandly American?

Why should not the nation bid this giant young city, as its truest type, a hearty God-speed in the great enterprise with which it grapples.

National Homeopathic Sanitarium.

There is being organized, an association for the purpose of conducting a medical, surgical and obstetrical institution upon Homeopathic principles. The capital stock has been divided into one hundred shares, of two hundred dollars each, and all Homeopaths are asked to invest. One-half of the face value of each share will be called for at once, to place the institution in good condition.

For further particulars address, Dr. Ralph St. J. Perry, Indianapolis, Ind.

Personal and General.

READ Dr. Monroe's letter.

DR. A. A. CLOAKY of Philadelphia '89 is now located at Louisville.

DR. A. C. JONES, formerly of Carrollton Ky., is now located at Muncie, Ind.

ALLOPATHIC doctors at Fort Worth, Texas, experimented with fatal results, with the "Brown-Sequard Elixir."

DR. W. A. DEWEY, of the *California Homeopath*, will return to his home from the east, about November first.

MR. THEODORE WEICKER, hitherto business manager, has become a member of the firm of E. Merck, manufacturing chemist, New York.

DRS. GROSVENOR, of Chicago, Parsons of St. Louis, and Bailey of New Orleans, are the latest addition to the already large list to be present at Memphis.

KENTUCKY is developing rapidly, (Homeopathically,) and if the other southern states are as active, your meeting at Memphis must of necessity be a good and and profitable one. . PROF. PRATT.

DR. W. B. CLARK, has written an excellent article upon "Suicide," which was published in the *Independent* of Indianapolis. The Journal will reproduce parts of it at a future date.

WE will have from abroad, Drs. Buck, Walton, McDermott, Eaton, Comstock, Edmunds, Richard, Campbell and others. We will have the most intellectual assembly of doctors that ever assembled at Memphis. PRESIDENT GREEN.

PROF. J. B. S. KING, after having ably filled the Chair of Chemistry and Toxicology, of the Hahnemann Medical College and Hospital, to the entire satisfaction of both faculty and students, for six years, has resigned.

THE opening exercises of the thirtieth regular winter session of the Hahnemann Medical College and Hospital of Chicago, were held at the Hospital Amphitheatre, Tuesday, September 17, 1889, at 8 o'clock. Addresses were delivered by David S. Smith, M. D., President; R. Ludlam, M. D., Dean.

"THE single remedy and medicine stopped when the patient is better, must be the only way to avoid confusion. While I use and prefer high potencies, I do not abuse those who have not been guided as I have, and I seldom defend myself when abused.

Effect cures with the single potentized remedy, no matter what the potency, and we are on the road to improvement. Mixing will hold us just where Hahnemann began." DR. KENT.

"WHAT we have to do with an art whose end is the saving of human life, any neglect to make ourselves thorough masters of it, becomes a crime."

HAHNEMANN.

We have all often read the above, but none of us have followed the advice therein too closely, nor can we. All read it again and make an indelible memory note of it.

DEAR DOCTOR:—Enclosed please find postal order for \$4.00. Have your clerk look up the account of the long legged, spectacled chap you met at the Institute, and inform him how far along this squares up to. When I get to it, I shall write some more for your Journal. I am very desirous of finishing up the series of articles I commenced some years ago, but have not found the time recently to resume labor in that direction. I live in hopes. See caution 3rd on back of postal.

DEAR DOCTOR:—We are "most truly yours," our readers want the articles and you must forthwith proceed to let us have them.

DR. WM. M. WILKE, late of Chicago. is now a *full fledged Texan*. The doctor has located in our city and does not propose to be overrun with business, and will therefore devote himself to the practice of Diseases of Women, exclusively.

DR. C. GURNEE FELLOWS has taken an office in the Bay State Building, No. 70 State Street, Chicago, Ill., Room 205 and 206, and will confine his practice exclusively to diseases of the Eye, Ear, Nose and Throat.

THE Western Academy of Homeopathy, at a recent meeting at Rock Island, elected the following officers for the ensuing year: President, C. J. Burger, M. D., Booneville, Mo. Vice President, C. E. Laning, M. D., Chicago; General Secretary, W. A. Paul, M. D., Rock Island; Provisional Secretary, C. J. Luyties, M. D., St. Louis; Treasurer, W. A. Foote, M. D., Galesburg.

FELLOW HOMEOPATHS bestir yourselves. Begin to get your valise in readiness for your trip to Memphis. Come the first day and remain throughout the entire session. Do not be late. The opening morning should find every loyal disciple of Hahnemann, at the Tennessee metropolis three days prior to the 1st of November.

A community of interest are to be looked after, a great deal will be learned.

The following titles of papers have been sent in, and the authors will be present to read their own *writings*.

The Male Sexual System, E. H. Pratt, M. D. Tumor of the Neck, C. E. Walton, M. D. Local Uterine Therapeutics, W. C. Richardson, M. D. Puerperal Fever, T. Griswald Comstock and J. A. Campbell, M. D. The Sympathetic Nerve as a factor in disease, Wells Le Fevre, M. D. Puerperal Eclampsia. J. W. Buddeke, M. D. Papilloma, W. A.

Edmunds, M. D. Eye Strain, G. C. McDermott, M. D. Pregnancy, M. M. Eaton, M. D. Therapeutics of Phos., A. L. Monroe, M. D. Lacerations of the Vagina, W. E. Green, M. D.

The best men in the profession, not only of the south, but north, east and west, are lending their earnest efforts to the good work. Give this matter careful thought, weigh the *pros* and *cons* and see if you can conscientiously let others do what you ought to help do. A three-fold duty urges you to be present, your State, Homeopathy, and the great personal gains to be derived in knowledge and social relations. You cannot afford to be absent. Come each one of you. Come all of you. Come jointly, come severally.

A LABORATORY GUIDE IN URINALYSIS AND TOXICOLOGY; by R. A. Witthaus, A.M., M. D., Professor of Chemistry and Physics in the Med. Dep't. University of the City of New York; Professor of Chemistry and Toxicology in the Med. Dept. University of Vermont, etc., etc.

The well known high standing of the author, of this work, renders favorable comments upon its contents unnecessary.

The unique and practical arrangement is of great assistance to the *physician*, especially if he is alone and has not three *hands*. Messrs. Wm. Wood & Co., 56 and 58 Lafayette Place, New York, are the publishers.

PARTS 9 AND 10, PHOTOGRAPHIC ILLUSTRATIONS OF SKIN DISEASES; by George Henry Fox, A. M. M. D., are the latest numbers issued by E. B. Treat, of 771 Broadway, New York.

These parts are both atlas and text book combined. Contents, No. 9, Leucodermia, Alopecia, Areata, Keloid, Fibroma. No. 10, Lupus vulgaris, Lupus verrucosus, Lupus erythematosus, Lepra maculosa, Lepra tuberosa.

OPHTHALMOLOGY AND OPHTHALMOSCOPY, FOR PRACTITIONERS AND STUDENTS OF MEDICINE; by Dr. Hermann Schmitdt Rimpler, Professor of Ophthalmology and Director of the Ophthalmological clinic in Marburg. Translated from the Third German Edition. Edited by D. B. St. John Roosa, M. D. LL. D., Professor of the Diseases of the Eye and Ear, in the New York Post. Graduate Medical School; Surgeon to the Manhattan Eye and Ear Hospital. 183 woodcuts and three Colored Plates.

Such is the title page of this excellent work, and a review of the contents at once explains how Dr. Schmidt-Rimpler's effort succeeded so favorably. This is the third revised edition, in a very short length of time, showing the high appreciation of the profession for the work. The name of St. John Roosa, added to this treatise, is sufficient recommendation to insure a speedy sale of this edition. The following is the arrangement.

Part First. General observations on the examination and treatment of the eye. Errors of refraction and accommodation. Amblyopia and Amaurosis.

Part Second.—Ophthalmoscopy. Ophthalmoscopic appearances in the healthy eye. Diseases of the Optic Nerve; Retina; Choroid and Vitreous body.

Part Third. Glaucoma and Ophthalmomalacia. Diseases of the Lens, Conjunctiva, Cornea, Sclera, Iris and Ciliary body. Sympathetic, Ophthalmia, Suppurative Choroiditis.

Part Fourth. Diseases of the ocular muscles, Orbits, Eyelids and Lachrymal apparatus. Wm. Wood & Co., Publishers, 56 and 58 Lafayette Place, New York.

Little Joe Fisher.

It is with sadness that the Journal records the death of the bright little three year old boy of Dr. C. E. Fisher, the circumstances of which were heart rending to his parents and friends.

It seems that the little fellow slipped away from his attendants and fell into the river at back of the premises. As soon as the loss was discovered every means was resorted to throughout the city, in a vain effort to find him—all to no avail—until the third day after the mishap, when the child's grandfather, while dragging the river, found the discolored remains of the once beautiful child. In the mean time Dr. Fisher and his wife, who were returning from a six months European tour, and had stopped at Chicago, received such information of the occurrences as was possible by wire, and on their arrival at home found the remains of their little darling awaiting them, with his childish talk of welcome, hushed in death. Our condolence is more heart-felt than is possible for us to express.

THE KUSTER-DOLBEAU OPERATION:—Dr. E. Laplace writes in the *New Orleans Medical and Surgical Journal*, for June, favoring the employment of Kuster's modification of Dolbeau's operation for vesical calculus and for the removal of foreign bodies from the urinary bladder. This procedure consists in a paraprostatic section of the urethra with subsequent dilatation of the incised urethra and neck of the bladder. The perineal incision is dilated to the size of a No. 8 Simon's dilator, which is sufficient to admit of the introduction of two fingers for exploratory and cleansing purposes. A certain proportion of the foreign contents of the bladder can be extracted by the fingers; what is too large to be brought out this way, can be readily managed with the ordinary surgical forceps. Dr. Laplace reports his experience in one case, in which the perineal wound permitted of the passage of urine until the tenth day when it closed; on the twenty-sixth day the wound was fully healed. Although the operation is but little known, it has been performed often enough to demonstrate the dilatibility of the prostatic urethra with ease and impunity. Dr. Laplace thinks that this operation will be found to be safe and easy where foreign bodies are in the deep urethra and bladder require surgical interference. *N. Y. Med. Jour.*

ADVERTISEMENTS.

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BEWARE OF SUBSTITUTES AND IMITATIONS.

Southern Journal of Homeopathy

NEW SERIES
NO. 10.

San Antonio, Texas, November, 1889.

OLD SERIES
NO. 72

• • Editorial • •

News and Comments.

We are informed that a respectable number of Allopathic physicians attended Prof. Pratt's course on Orificial Surgery, held during the early days of September. The circumstance is most significant. When the devotees of Mediocrity Therapeutics are content to sit under the teachings of a Homeopathic Surgeon, we may begin to look in the direction of a bright era.

It may be well to remind some gentlemen of the Homeopathic School that they can find an example worthy of all imitation in the actions of these "Regulars."

There appears to be a curious confusion of ideas concerning the matter of "loyalty" in our School. Some writers propound a postulate of Samuel Hahnemann's with about the same spirit that the average minister lays down the law of Moses. As Samuel Hahnemann was mortal, it need not be said that his system is imperfect. *Similia Similibus Curantur* is a great law, not because Hahnemann discovered it, but for the reason that its application in the cure of the sick is almost universal, and its results the most gratifying that the world knows anything about. Hahnemann was a

great man and a great physician, and his name will live for the remainder of time; but when men set him up for an infallible being they make themselves at once odious and ridiculous.

"After all, what is man?" asks a pessimistic editor. We really do not know, but we have generally taken him to be *a piece of proud flesh*.

A few days since a gentleman stood on a prominent thoroughfare of Boston and counted forty-three pairs of eye-glasses on the noses of one hundred passing ladies. Isolated facts like this count for very little, of course, but it would seem from general observation that the American eye, like the American tooth, is rapidly on the decline. The old scriptural passage, "An eye for an eye and a tooth for a tooth," may have to be amended to read, "A glass for an eye and a filling for a tooth."

It is now said that Mrs. Benjamin Harrison is a Homeopathist, while her husband is not. The President must change his school of medicine if he would keep up with the times. We can assure him that Homeopathy is just the thing for Presidents.

An Allopathic physician says that

"Homeopathy is good enough for children and old women." Of course it is, and a mighty good thing for everybody. We are always glad to note signs of enlightenment breaking upon the Old School.

Our bright Chicago contemporary *The Medical Current*, says it would like to see more intellectuality in the profession. So should we; and if *The Current* will kindly point out the way we assure it of our earnest support.

The following letter was written to Dr. J. D. Buck, Dean of Pulte Medical College. We give the letter *verbatim*:
Mr. J. D. Buck, M. D.

DEAR SIR:—I Have Studied Medicine Since 1885 or about that time. During Lessure hours when not at work I am married and Have a Family. I am 27 Years of Age and Would like to Run a 2 years Course if it can be had. if so please State all Particulars. and if not Please State aliso, and let Me Know what I have to Do.

Very Respectfully Yours,

Waiting for Reply.

Dr. Walton, the Registrar of the College, took the matter in a serious vein and sent the young man some very sound advice, urging him in effect to abandon the idea of becoming a physician.

The young man assures us that, "During Lessure hours," he has reared a family—a very commendable thing to do, and something that every practitioner of medicine needs to make a success of his profession. We earnestly advise him not to "run" a two years' course, but to walk at a moderate gait. A snail's pace would meet his needs most admirably. Certainly the two years' course "can be had," and we shall be very much sur-

prised if "Yours Very Respectfully" does not graduate in March, 1891.

Our esteemed brother, Chas. Gatchell, is not pleased with what he calls the "anonymous ambush" of *Similia*. Evidently he wants to know at whom he is directing his shots; but our identity is of no consequence whatever.

We must remind our distinguished contemporary that no punishment which he could inflict upon us would in any degree lessen our sincere regard for his eminent journalistic services. Always brilliant, always entertaining, never sentimental, rarely inaccurate, he has given the Homeopathic profession lessons in clean, bright, progressive journalism, which are the wonder of some and the pride of all. He took charge of *The Era* when it was drifting on a troubled sea, made it the mirror of his unique but erratic personality, and has placed it high among the medical prints of America.

But, when he attempts to demonstrate the impossible, as he does when trying to convince his readers that pure *Quinine* is guaranteed by high taxation, failure is simply inevitable. It matters not whether Powers & Weightman operate foreign works to supply American trade; it is immaterial that, as *The Era* charged, we misspelled a word; but it does make a vast difference with tens of thousands of people whether or not they can obtain pure drugs at reasonable prices. We insist that *The Era* shall discuss the logical outcome of its position—that cheap articles are more liable to frauds than high-priced commoditties.

The question is one of political economy, pure and simple, and we are not disposed to abandon a position now occupied by the ablest minds in America for one as certain to crumble as the light of day falls upon it. And we are not to be

silenced by sneers, being accustomed to round shot and cold steel.

It ought to be the settled policy of Eclectics and Homeopaths to affiliate and cooperate on all possible occasions in matters pertaining to medical legislation. The shameful tactics of the "Regular" school in the Southern States are well-known, and it behooves the physicians of the two progressive schools to unite in opposing them at all points.

Some years ago John Swinton, a brilliant journalist of New York, established a paper which he modestly named for himself. It died after a few unhappy years of existence.

There is a medical journal in Texas— but pardon us for suggesting Daniels!

Some silly sentimentalist says that "the human body is too sacred to admit of such mutilation as castration for any crime, however great."

Not by any means. The human body is only sacred when it carries a pure mind and a righteous spirit. But when it degenerates into a mechanism for the carrying out of infamous purposes it is at organic war with society and must be punished accordingly. A vicious dog is shot; a predatory bull is slaughtered for beef; an inferior colt is castrated, and there is no sound reason why criminals should not be prevented from reproducing their kind by the removal of their testicles.

The moral effect of such a procedure can hardly be calculated. The reproductive powers, no matter from what motive, are prized above every other human possession; and the very possibility of losing them as a punishment for crime would deter thousands from entering a criminal career. We believe that the march of civilization will bring society to

a point where it will protect itself from a second generation of criminals by castrating the first.

An Allopathic physician says that "Homeopathy is a humbug." Perhaps it is, as some men practice it, but Allopathy, under all circumstances, is a humbugger.

It has been suggested that the medical profession should take some part in the coming World's Fair, to be held in the city of Chicago some time in 1892. We feel sure that some very interesting specimens might be exhibited. For example, a miniature diploma mill, showing the rapidity with which students are converted into "Doctors of medicine and surgery, with all the immunities and emoluments thereunto appertaining, could not fail to be of great interest to many foreign visitors. Besides this, a few "specimens" might be labelled as follows.

No. 1.—A doctor who attended three full courses of medical lectures.

No. 2.—A man who knew how to use capital letters, and some of the rules of grammar, before entering a medical college.

No. 3.—A person who failed to pass the preliminary examination in an American medical college. Only case known. Specimen contributed by Hooppole County Medical Society.

No. 4.—A medical professor who did not buy his professorship. Very rare. Died early.

No. 5.—Photograph of the college that was not started as a Cooperative Advertising Association.

No. 6.—This rare diamond pin was found in the East End Free Dispensary. Lost by a lady who came to have a tooth extracted.

No. 7.—These books are the last remaining copies of Dr. Juggernaut's *System of Mystification*.

No. 8.—An Allopathic Editor from Texas. Not dangerous. Frequently taken for a wild ass.

Doubtless this collection will be materially increased before the time for holding the Fair rolls around. Even at the present moment, we can think of some exceedingly valuable additions.

A curious scribe writes to ask what we meant by the term "Asseons," as applied to divers and sundry editors. We intended to write the word ASSEOUS, as our correspondent might have seen from the context. We have no objection, however to answering his query: An asseous editor is an editor who makes an ass of himself. What else could it mean?

Our brother, Dr. Frank Kraft, the accomplished editor of *The American Homeopathist*, is out with a Gatling gun looking for the parties who took a hand in squelching Brown-Sequard's "Elixir of Life." Bro. Kraft is sure that the elixir did not have a fair trial; that it was, like Homeopathy, condemned without a hearing, and that the guilty ones should confess their sins and humbly beg the forgiveness of Mother Science.

Much that *The Homeopathist* says is true; the "Elixir" was condemned by hundreds who knew nothing about it, and who, moreover, wanted to know nothing about it. But where Does Dr. Kraft find the parallel between Brown-Sequard and Hahnemann? We want to know if the advent of Homeopathy was heralded in the daily press? if its cures were sounded far and near under heavy headlines? if, in short, it was brought forth under any of the disgusting sensationalism surrounding Brown-Sequard's alleged discovery? We fancy there are

very few points of resemblance between the early struggles of the great Launch cure and the meteoric flicker of the lately departed French fraud.

At last, and after much waiting, the American public can see the end of the long wire so artfully and successfully pulled by that blatant sensationalist, William A. Hammond. For years he has spread himself over the country through the columns of monthly magazines and through the dispatches of the Associated Press, ever ready to have himself "interviewed," ever willing to tackle a sensation, always blowing a very loud horn for the pecuniary profit of W. A. Hammond.

Dr. Lewis A. Sayre, the renowned New York surgeon, has dug a deep, wide hole, into which Hammond ought to retreat at once, making sure that some kind friend would throw plenty of dirt over him.

The facts as charged by Dr. Sayre, and which have not been denied by Dr. Hammond, are these: Some years ago a prominent Southern judge, wellknown and highly respected in fashionable circles of New York, went to the metropolis to consult Dr. Hammond about the failure of his mental powers. After an examination, the patient was informed that his recovery depended upon the removal of a piece of bone from the cranial cavity, which operation Hammond proceeded to perform, and as a proof of which he later exhibited a bone which he told the judge had been the cause of all his ailments. An apparent improvement followed, which, somehow, by some inscrutable means, leaked out and, of course, found its way to the general public, greatly to Dr. Hammond's financial advancement. The improvement, however, was illusory; the patient

was soon taken to an asylum, where he died. An autopsy revealed the fact that the skull had never been opened. The bone which Hammond claimed to have removed, and which he exhibited to the credulous judge as an evidence of his great skill, was afterwards proved to have been a *chicken bone*.

Such rascality as Dr. Sayre demonstrates ought to clothe Hammond in jute bagging and wood ashes for the remainder of his life. If, however, he takes up his pen again, we suggest the following subject: "How I Worked the Chicken Bone Racket on a Man from Dixie."

We know of a student who desires to attend a strictly second-class college. No others need apply. Any college desiring the student will please communicate with this journal at once.

SIMILIA.

Homeopathy in the New Asylum.

EDITOR JOURNAL:

The last legislature of the State of Texas made an appropriation of one-hundred and fifty thousand dollars, for the erection and establishment of an additional asylum for the Insane, and the commissioners appointed for the purpose of selecting a proper location therefor have decided upon San Antonio as the home of the new institution. It now only remains for the Governor to issue his proclamation announcing the decision of the commissioners and inviting bids for the erection of the buildings, for the work to begin.

What do the Homeopaths of Texas propose to do toward securing control of this asylum?

There are already two Insane Asylums in the state, under the management of the Allopathic profession, and it is but fair to the Homeopathic tax-payers of

Texas and to the new school of medicine and to the insane themselves, that the third asylum be placed under Homeopathic control.

Such a move would not be an experiment. New York has two State Asylums for the Insane under Homeopathic management, one at Middletown and the other at Binghamton, while Massachusetts has a four hundred and fifty thousand dollar asylum at Westboro under our direction, Minnesota following with another at Fergus Falls, and Michigan keeping in line with her institution for the criminal insane, at Iona, under Homeopathic care.

In all of these institutions the results of our treatment have been most satisfactory to the profession and to the State. An examination of the records show a percentage of cures and of improvements far in excess of the records of old school asylums throughout the country, and it is a matter of sincere regret with the writer that he has not yet unpacked his library since returning from abroad, as he is thereby prevented from presenting a comparison of the statistics of various state Insane Asylums, Allopathic and Homeopathic. This can be done later, but it should not be delayed, as work on the new asylum will hardly be commenced before the Governor will appoint the new superintendant, part of whose duties it will be to see that the buildings are erected in accord with all the latest improvements in sanitary institutions, and whatever movement the Homeopaths of Texas, if any, is contemplated should be undertaken at once.

I would suggest that the president of the State Society appoint a committee of one or two members to correspond immediately with Dr. Seldon H. Talcott, Superintendent of the Middletown, N. Y., asylum, Dr. N. Emmons Paine, Superin-

tendent of the Westboro, Mass., asylum, and Dr. O. H. Long, Superintendent of the Michigan Asylum for the Criminally Insane, at Iona, Michigan, soliciting all data in their possession having a bearing on the subject, with a view to placing correct information before the Governor and the people of Texas, that justice and equity obtain to the Homeopathic profession and tax-payers of the state, and that the Insane have the benefit of the best and most successful treatment known to the Insane Asylums of the United States.

Possessed of this information, petitions should be prepared setting forth the facts and praying for the appointment of a Homeopathic superintendent to the new asylum and the employment of Homeopathic treatment therein. These petitions should be put in the hands of every Homeopathic physician and every willing layman in the state who should secure thousands of signatures of influential citizens and Homeopathic tax-payers in every community, and they should be presented to the Governor with arguments supporting the first choice of Homeopathy to a share of the patronage of the state, and if necessary the Legislature should be called upon for justice and equity in the premises.

The Allopaths have all the medical office in Texas. The State Health Officer is an Allopath, and all of his medical deputies are Allopaths; the Superintendent of the Lunatic Asylum at Austin, is an Allopath; the Superintendent of the Lunatic Asylum at Terrel is an Allopath; the Superintendent of the Blind Asylum at Austin is an Allopath; the State Oculist is an Allopath; the President of the Board of Regents of the State University, is an Allopath—and so it goes, Allopathy has all the offices, while Homeopathy, a more modern, humane and generally successful system of medicine, is left “hold-

ing the bag.” And this too, notwithstanding the fact that hundreds of thousands of the most intelligent people of Texas prefer and employ this system.

These people and their physicians have no representation in the medical department of our government, notwithstanding the fact that they pay taxes on millions of dollars worth of property, and notwithstanding further the additional and very important fact that the Constitution of the State of Texas, in Article XVI, Section 31, says no favor shall be shown by law to any particular school of medicine.

I hope the JOURNAL and the profession will get a very active move on them in this matter and that a thorough and persistent ventilation of the question will result in the securement to Homeopathy of her just rights in Texas.

C. E. FISHER, M. D.

The Homeopathic Union.

The first regular meeting of the New York Homeopathic Union for the season was held at the residence of Dr. E. Carleton, Thursday evening, October 17. The following resolutions were presented and unanimously adopted by the Union.

WHEREAS, Our esteemed friend and colleague, Dr. Edward Bayard, has been called from the scene of his labors; therefore

Resolved, That in the death of this veteran physician we have sustained the loss of a leader who was ever true to law of *similia* discovered by HAHNEMANN, zealous in the discharge of duty, eminently successful in healing the sick, a wise counsellor, always courteous, a kind and valued friend to all who were so fortunate as to have his acquaintance.

Resolved, That while we deeply mourn his loss, we gratefully revere his memory and emulate his long and unselfish devotion to the promotion of the best interests of humanity.

Resolved, That these resolutions be spread upon our minutes, and that copies be sent to Dr. Bayard's family, and to the medical press.

• • Practice • •

Some Ideas on Dysmenorrhœa.

READ BEFORE THE KENTUCKY HOMEOPATHIC STATE SOCIETY, BY M. D. DILLS, M. D. CARLISLE, KY., MAY, 1889.

To write an article on any subject in this day, is a task of no easy undertaking; men of letters are changing their opinion so constantly, and theories as numberless as sands of the sea shore, ever changing as the kaleidoscope, and standing ready to criticise every idea advanced and crowd in a new theory, that it is indeed a hazardous adventure to step into the chaldron of any science and come out without a severe scalding; and no field, is perhaps, so dangerous as that of medicine, so varied as that of its followers.

But as all truth is propagated and made active in the world through ideas, we venture to follow out our ideas, formulated with experience in regard to all subjects, that can be practically demonstrated, and as I claim ideas that cannot be formulated into something practicable, are worth but little. We can reduce our ideas as to diseases and their treatment into facts, and only so far as we can do this, are they of any use to us. "Idea is bodiless substance, which of itself hath no substance, but giveth form and figure to shapeless matter, and becometh the cause that bringeth them into show and evidence," so, there, to repeal ideas in our profession, which do not produce something as an evidence, is of no use; consequently our aim should be to reduce and submit to the crucible our ideas and theories, and if something with form and evidence is not produced, instead of casting it on the public, consign it to the waste basket.

These few introductory remarks, simply as a hint, to the many false and cranky ideas that so many of our leading men

are constantly throwing to the surface, especially in medicine, to confound and confuse an humble seeker after truth.

I beleive that Hahnemann conceived the grandest idea, and gave birth to the greatest show and evidence of his idea, that has ever emanated from the mind of man, when he gave to the world, facts, that have formulated present ideas and truths in his "*Similia similibus curantur.*" It was just here that order was brought out of chaos and the medical world began to formulate a great truth, that has spread lightning like, through and over all obstacles, until to-day it is the great and living idea, that leads the sick and suffering to strength and health, bearing in brazen letters to the sick, the motto: "*Cito toto et jecundo.*" In no department of medicine have so many ideas been advanced as that of Gynaecology. And it looks as if—after exhausting every other department—the residue of our forces have been turned loose on the female sex, and it has become the target for every tyro of medicine. And the only thing that stands in the way of healing every and all diseases, is that the patient is unfortunate enough to be a male. If it were only a woman your case could be cured by repairing a lacerated cervix, as your symptoms are so akin to that trouble, but there is no show for you unless you find it in the next door neighbor, the rectum.

But to our subject. After diligent study of many years, following the writings of many eminent old school Gynaecologists, using all the modern instruments to aid us in our diagnosis and following various lines of medicaments, we are startled at the announcement, by a worthy chieftain of the so-called scientific school, that after a long experience in the practice of Gynaecology, he wishes that he had never seen a uterine sound; holy Mahomet what an idea!! Then after a

long and tedious search for remedies to correct uterine troubles by introducing them into the cavities of the uterus, another propet exclaims, they are of uncertain utility and more frequently dangerous. Again we are paralyzed, but once more we start again afresh with new hopes and renewed vigor; now we begin to diagnose and find displacement of that important organ of the female sex, the uterus, the cause of all her sufferings, so we launch out in the domain of Pessaries and indeed what a rich field we find.

Pessarie straight and pessarie curved,
 Bent and shaped to miss a nerve.
 Pessaries short and pessaries long,
 Marching in an endless throng.
 Some blown from glass, some filled with air,
 Certain cure, if handled with care.
 Pessarie of silver, that won't grode,
 Nevertheless a heavy load.
 Some worn within, some worn without,
 But pessarie, pessarie all about.

Now after all this agony, we are told that but few cases are benefited by pessaries, and it requires great skill to adjust and fit them, and upon the whole they are of little benefit: as Col. Sellers exclaimed, when his steamboat blowed up. "busted *again*." After the smoke has cleared away and our patient has become disgusted and left us, we begin to look for pastures new and fields more successful. This as to the ideal part of my subject. Now to the second, Dysmenorrhoea.

I shall consider the causes of Dysmenorrhoea, as we most frequently meet it under four classes.

First. Inflammatory.—Where we have corporeal endometritis, we would naturally expect that inflammation of this kind, the catamenial discharge would be deranged; either profuse, scanty, irregular, and attended with pain, or the functions may be suppressed altogether. The rule is, however, that profuse, prolonged and painful menstruation is present. When these derangements occur and there is no

constitutional or other local cause to account for it, we may reasonably infer that the mucous membrane is at fault: hence we term this the inflammatory type; in which Homeopathic remedies give us brilliant results. I may add that we may have cervical endometritis occurring with corporeal. The discharge shows the characteristics of both. I have seen a few cases of Amenorrhoea occurring from the above affection; this is accounted for by the condition of the mucous membrane in the different stages of the disease. We find this same peculiarity noticed in inflammation of other mucous membranes, so to treat this condition of the parts will require, in many instances topical treatment, combined with the indicated remedies. I have best success with Glycerine, Iodine, and Carbolic Acid: a solution applied to the cavity of the uterus twice a week for a fortnight and at the same time painting the cervix with Tinct. Iodine, and giving indicated remedies, of which I have greatest success with Cinicifuga and Pullsatilla and Aconite.

Secondly we consider briefly Membranous Dysmenorrhoea. Opinions are varied as to the cause; the most general opinion at present attribute most of the trouble to ovarian influence; the condition of the ovaries being that of an undue nerve excitation and possibly congestion.

My experience confirms this idea, as I have never seen a case occur except in nervous individuals and generally young women leading a society life, and of very nervous temperments and most frequently anaemic; here again I have found Homeopathic remedies to work wonders. I seldom find it necessary to prescribe more than two remedies, Phosphorous and Acetic Acid, both remedies producing in their effects, Memb. Dysmenorrhoea. I give Phos. and Acetic acid alternately between periods, using occasionally Carbolic acid and Glycerine to the cavity of

the uterus. Iodoform and Glycerine is often useful, applied to the membrane.

Thirdly. Neurotic or Obstructive. Derangement of menstruation is nearly or quite always present in flexions of the uterous or the cervix. Here we enter the field of pessaries, vieing with each other to offer us a helping hand toward curing our patients.

The scope of medical territory taken up by flexions and their treatment, is too varied and wide to enter into a paper like this. I will say, however, that Dysmenorrhoea is more frequently the result of flexions in the young female, than perhaps any other cause; doubtless these displacements occur before puberty and give their first indications when menstruation begins. These displacements in the young are easily understood. Antiflexions being the most common. The position in sitting, at school and at sewing, often maintained by girls, constipation and improper lacing, all tend to retard development and produce flexions.

The uterus might readily increase in size at all parts except the portion compressed at the point of flexion. As to displacements caused by inflammation, etc., are symptoms easily recognized. A young girl just menstruating for a short time, calls on her physician for medicine to relieve pain; her symptoms are well marked and the indications very prominent, but in spite of our prescription, no relief is found, and often the remedies are blamed; it is just in these cases we find antiflexion of the uterus, with perhaps stenosis at the point of pressure. As before mentioned, what are we to do in these cases? In the majority of them nothing permanent, unless we can examine the uterus or correct the flexion. The reason why this is seldom done in the unmarried is obvious. These cases will be but little benefitted, until we have an opportunity to correct the deformity.

Our remedies in these cases can accomplish but little until the mechanical cause is removed; various plans of treatment are advised, the majority of which recommend pessaries of some sort, using frequently the stem; great care and close watching, I have found to be very essential when using the stem. The uterus may be replaced by uterine adjusters, that of Elliott's being the most useful.

Sim's operation, clipping out a V shaped piece in each lateral edge of the Os, and bringing it together with sutures. By contraction of the fibres the vaginal portion of the cervix is shortened. Dysmenorrhoea from flexions of the uterus, can not in my judgment, be treated successfully, until the deformity is remedied by some of the above suggestions; hence the importance of a proper causative diagnosis. Mechanical obstruction being the cause, mechanical means must be used to remove them.

Fourthly. The cause of Dysmenorrhoea may be ovarian—hyperæmia—a derangement of circulation, in which there is congestion and the consequent derangement of functions, with resulting pain and suffering; the pain may be most intense before the flow and when we have a free flow with pain, preceding or during flow, and patient unmarried or widow, who has never borne children and of a nervous temperament, with pain and heaviness in ovarian region, great nervous disturbance, irritable, easily excited and easily fatigued—menorrhagia being a prominent symptom—we may suspect ovarian congestion and irritation, which frequently increases from time to time, until we have as a result anaemia and neurasthenia, this state of health continuing indefinitely. I will quote just here from a prominent author on this subject, as to the causation of ovarian hyperaemia:—Over stimulation of the

emotions, in those of a nervous temperament, is one the chief causes of ovarian congestion. This is operative among those who are not usefully employed, but are permitted or even encouraged to turn their attention to the procreative function while they are still undergoing development. Stimulating tonics, which create an appetite that is not satisfied with food, will cause gastric congestions and all the consequences that arise therefrom. In a like manner, stimulating the appetite of unoccupied emotional girls by evil influences or improper associations leads to ovarian congestion. Indulgence beyond normal gratification is also said to produce the same result. All these causes are to a great extent psychical, but ovarian congestion may be produced by purely psychical causes. It may be secondary to endometritis, sedentary habits and constipation, which may interrupt the free circulation in the pelvic organs. Thus we may trace almost all the foregoing troubles, that are the principal factors in causing Dysmenorrhoea, to causes that could be avoided, if proper hygienic care was observed; hence the importance of the physician using his influence to bring about a proper system of hygiene in young girls and urging the importance of more care and protection on the part of mothers toward their daughters; and thus send up a universal condemnation of the vicious habits and practices, that mothers allow their daughters to indulge in, and then fall victims to suffering and disease, during what should be their most useful days. We can not hope to do much in such cases, unless we can have the co-operation of mothers in preventing exposures, undue excitement and temptation on the part of their daughters. This subject could be prolonged indefinitely on this line but these few hints are sufficient to call one's attention to the results.

The successful treatment of all cases of

Dysmenorrhoea will be in accordance with our knowledge of the causes producing the same, if mechanical, our remedies will not act until hindrances are removed, and so as to the last class, the importance of a proper diagnosis as to the "causa morbi" is obvious in these cases.

Diseases of Pregnancy and Lactation.

BY S. M. NEWHALL, M. D., OF NEWTON, KANS. READ BEFORE THE KANSAS STATE HOMEOPATHIC MEDICAL SOCIETY AT EMPORIA, KANS., MAY 2D, 1889.

Ladies and Gentlemen:—The theme chosen for this paper, I am aware opens up a very broad field, much too broad to receive due attention in the time allotted here, therefore :

In treating of the diseases of pregnancy, I shall try to be as brief and practical as possible; assuming that the members of the society are familiar with the more common every day complaints attendant upon the condition, and shall only enlarge upon a few of the more serious and less frequent disorders attending the period of gestation.

Gastric Derangement, commonly called morning sickness, notwithstanding it may occur at any time during the day, or night, usually begins, in a majority of cases, about the fourth or sixth week after conception.

It is caused by reflex nervous irritation from the developing foetus, and corresponding textural changes and enlargement of the uterus during the gestative period.

The remedy in the great majority of cases, is *Nux Vom.* 3x6x to 30 or higher if the patient is very nervous, or highly susceptible temperament.

Other cases that resist *Nux Vomica*, *Tartar Emetic* will relieve; "vomiting suddenly with only temporary nausea, *Ipecac*, continued nausea all the time, in short, each individual case, must be

met by the true *similimum* for the particular symptoms present; no derangement yields more readily, if the true *similimum* is found and exhibited. Occasional cases prove very intractable, from injudicious, and often outrageous treatment.

Some cases will yield to a few swallows of hot water, and need nothing else; others to vaginal injections of hot water, with a tablespoonful of glycerine added. Careful regulation of the diet, partaking of small quantities of mild, nourishing food, before rising, will relieve very many cases.

Studying the patient's idiosyncrasies, and meeting their indications in a common sense way, will go very far in relieving the case. I have relieved some very obstinate cases that had resisted Allopathic drugging, by alternating Nux Vomica 6x, and Tartar Emetic 6x.

If there is congestion or inflammation of the os and cervix, a pledget of cotton saturated with glycerine and water equal parts, warm and medicated with Calendula or Belladonna applied to the os, will afford prompt relief.

Heartburn, or *Pyrosis*, is quite frequent but yields to Nux Vomica, Pulsatilla, or Carbo Veg.

Constipation, in most cases gives way to the judicious use of Nux Vomica, Alumina or Bryonia, and a well regulated diet.

Diarrhoea and Dysentery, often alternates with constipation, but in most cases yields to the indicated remedy.

Headache, Haemorrhoids, Oedema of the lower extremities, in some cases quite distressing, usually yields to rational Homeopathic treatment, and common sense expedients.

Varicose Veins, may require mechanical support by spiral bandages, or elastic hose, but most cases yield to Hamamelis 3x or 1x internally, and bathing with

a mild lotion of the tincture in tepid water.

Dyspnoea, Palpitation, Vertigo, Enuresis, may be temporarily annoying at times but are relieved readily by the indicated remedy, and the use of good common sense.

Dysuria, may occasionally require the use of the catheter, but the application of flannel wrung out of hot water over the region of the bladder, and the administration of Belladonna 6, Cantharis 3, or Nux Vomica 6 x, or Camphora 3 x, will relieve nearly all cases.

Pruritus, is most always promptly relieved by a mild lotion of Borax in warm water, with a very little glycerine added,

Leucorrhoea, in nearly every case yields to a mild solution of Calendula and glycerine, in warm water injected morning and evening; if at all offensive to smell, add a few drops of Carbolic acid to the solution injected.

For the sake of brevity I shall pass over Icterus, Insomnia, Cramps, Ptyalism, Paralysis or rather numbness, and temporary Chorea, all of which may be very annoying, and sometimes distressing but yield to suitable treatment and rational expedients.

Relaxations of the Articulations of the Pelvis, nearly always present, in a slight degree, is in some cases so excessive as to interfere with locomotion, and give rise to inflammation, and ulceration, and endanger the life of the patient.

I have one patient in whom the left sacro-iliac symphysis was so relaxed in three successive pregnancies, that in the last an abscess formed which fortunately discharged into the vagina. She could bear no weight on the left limb at all; she was enjoined to remain quietly in bed, but repeatedly violated the injunction, hence the abscess. There was a scrofulous taint in the family. She received Calc. Carb.,

followed by Silicia, and Hepar Sulphur, successively, made a complete recovery, and is sound to-day.

Disorders of Lactation :— As soon as the mother has rested sufficiently, and has been properly cared for, the child should be allowed to nurse, and if necessary should be induced by all reasonable means to nurse, in order to promote the healthy secretion of milk, and the gradual cessation of the lochial discharge. When this normal function of the breasts is established properly, and the secretion of the milk is normally performed, and in sufficient quantity, and of good quality, all is well. But unfortunately this is not always the case. Sometimes there is acute inflammation of the breasts, either of one or both, and scanty secretion of milk, with swelling and hardening of the glands.

For simple deficiency in the secretion of milk, either Bryonia or Pulsatilla, as best indicated will promptly relieve in most cases. Should the milk really seem to be drying up, the application of warm Castor oil will restore the secretion in many cases or if in the summer season, and it can be obtained, the leaves of the castor bean plant, "*Ricinus Communis*," bruised and applied warm to the breast is even more effectual.

Should the swelling continue and the hardening increase and become painful, a warm solution of *Phytolacca* -o-, 30 drops in half a pint of warm water, applied by means of a compress to the swollen breast and kept warm and moist with it, at the same time giving *Phytolacca* 3x internally every two hours, *has never failed in my experience* to arrest and promptly reduce the inflammation, and completely cure the worst cases.

Galactorrhoea, or excessive flow of milk has always yielded to *Belladonna*, 3x to 6x internally, and the application of a mild solution of the same to the breasts, in my practice:

If this should not prove effectual apply camphorated lard or sweet oil to the breasts once or twice daily.

Sore Nipples :—Calendulated water, or cosmoline will promptly cure most cases. Some cases Graphites and cosmoline, others arnicated sweet oil, or arnicated water, will promptly cure.

I have thus briefly touched upon the more important disorders of pregnancy and lactation, leaving much unsaid, in order not to weary your patience, hoping to elicit anything new that may have occurred in your experience, and thus add to the general interest of our meeting.

What Caused the Pneumonitis?

A sound, active, vigorous and healthy man, thirty-four years of age, was exposed in a dilapidated and leaky passenger coach for thirteen (13) hours on the night and day of December 3rd and 4th, 1888. During this time the coach was without fire, and its impaired condition admitted the rain to such an extent that this patient got wet and chilled through and had to remain in this plight 'till his journey's end.

Upon the 11th day of December, this man was stricken down with pneumonitis and was confined to his bed 'till January 4th, 1889, and now has solidification of one lung. From the 4th to the 11th of December the patient received the best of care and had good attention (old school), through his illness. He claims that he contracted a bad cold on December 4th, which developed into pneumonitis on the 11th day of the same month.

Bronchitis, or its sequence, a bad cold, is an inflammation of the mucous membrane of the bronchial tubes. It does not extend to the bronchioles. The inflammation may extend to the sub-mucous tissue and ends there. The disease is usually brought about by exposure, sudden change from warm to cold, or vice versa.

The tissue attacked is the mucous membrane of the bronchial tubes supplied by the bronchial artery. The time for the disease to terminate is not definite, the decline usually begins in four to eight days.

Prognosis, chronic bronchitis or patient gets well.

In a case of bronchitis, if left to itself, and ordinary care be taken of the patient no serious result will terminate the sequence of a bad cold.

The first stage of pneumonitis is engorgement; i. e. chill, and lasts from a few minutes to several hours. During this time the transudation is pouring out of the over-distended blood vessels into the parenchyma and alveoli. Just as soon as the material is out of the blood vessels, it begins to organize and gives rise to dyspnoea, etc.

The second stage is reached in from six to twenty-four hours. The cause of pneumonitis is from sudden exposure of those who harbor some latent dyscrasura, and the disease is usually developed spontaneously.

It is claimed upon anatomical grounds that bronchitis cannot run into pneumonitis.

At the termination of the bronchial tubes in the intercellular passages their constituent elements become changed—their walls are formed by an interlacing of the longitudinal elastic bundles with fibrous tissue; the mucous membrane is thin and delicate and lined with a layer of squamous epithelium. The coats of the bronchial tubes become more delicate in structure as the tubes are diminished in size. The larger cartilaginous rings which are seen in the trachea, are continued in the larger bronchi, but the rings soon become replaced by irregular cartilaginous plates, which themselves soon disappear. Not only do the cartilaginous

plates disappear but also the mucous glands consentaneously. The alveoli (seat of pneumonitis), consist of delicate basement membrane lined with pavement epithelium.

The mucous membrane, which is the seat of trouble in bronchitis ceases, or at least loses its characteristic features. The bronchial membrane is lined with ciliated columnar epithelium. The fibrous, elastic and muscular tissues only are continued from its bronchial tubes into the bronchioles.

Again the blood supply to these tissues is different. The pulmonary artery terminates in a dense capillary network, upon the walls of the intercellular passages and air-cell. The bronchial arteries are distributed to the bronchial glands, upon the walls of the larger bronchial tubes, some ramify upon the walls of the smallest bronchial tubes.

The inflammation in pneumonitis is in the membrane lining the aircells and bronchioles, that of bronchitis, the bronchial mucous membrane. The differences of these tissues together with different functions, serve to explain the fact that the inflammation in pneumonitis may be limited to pulmonary substance and that in bronchitis the inflammation does not extend to pulmonary parenchyma. This is in accordance with a pathological law; viz: inflammation seated in a structure does not, as a rule, extend to another structure, however proximate, which has important anatomical differences or differs as regards its functions.

Summary:—Pneumonitis arises from such a severe congestion of the lungs, from over-exercise or sudden change of temperature, in those where there is some latent dyscrasura, as at once progresses into an inflammation of the pulmonary structures. It cannot arise from a cold contracted six or seven days prior to the

attack, neither will a bronchitis which is the pathological sequence of a bad cold, terminate in pneumonitis unless some other cause intervenes to produce it. It is a common error to suppose that a bronchitis, if not cured or well treated, will eventually end in pneumonitis.

G. G. CLIFFORD, M. D.

Typhoid Fever.

BY A. J. CARPENTER, M. D., LOGANSPOUT, IND.
READ BEFORE THE SOCIETY, AT EMPORIA,
KANSAS, MAY 2, 1889.

Typhoid and Typhoid Malaria fevers constitutes 4.20 per cent. of mortality of the State of Indiana. Dr. Hooper describes fever as a disease characterized by an increase of heat, and impaired state of several functions of the body. We agree with Dr. Pulte that the term fever is frequently misunderstood, for it is applied not only to every reactive force of the *vital* powers against disease, but also to that condition where the "Vis a tergo" or *vital* forces, are actually abridged, as in the *Epialus* of Galen, or the *Quercera* of the Ancient Latins. Dr. Eberle says: "the history" of practical medicine consists of little else than a review of the doctrines which have successively risen and sunk again, concerning the nature and treatment of fevers. Whatever other objects of interest or importance, within the dominion of medical science may have attracted the attention of physicians, fever has at all times been viewed as presenting the most extensive and inviting field for observation and the exercise of ingenuity; it is in this department that observation and research have been most industrious in accumulating materials, and that *hypothesis* has luxuriated in her wildest *exuberance*. The doctor's assertions are fully proved by the hypothetical doctrines of the past, embraced in part by the humorous and pathological theories; some regarding all diseases as

fevers and necessarily idiopathic in their nature while others equally zealous, maintain that all fevers are (symptomatic) depending upon primary inflammation. This local cause of fever is referred by Eisenmaron, Henle, and others, to the spinal marrow, and by Broussais to the mucous surfaces of the stomach and bowels. But it is unnecessary further to notice these speculative vague and contradictory theories, concerning the pathology of fevers; its uncertainty to the Allopathic physician must be hazardous in the extreme by misguiding his treatment, while to the Homeopathic physician it is altogether needless, in a practical point of view, even though it could be referred to spinal irritation to the mucous surfaces of the *primae viae* or to the effects of morbid agents upon the sentient extremities of the nerves, for we must regard the pathognomonic symptoms of fevers as the reaction of the organism against morbid cause; and by referring to the ultimate constituents of that organism, and the specific law governing their relations, the philosophy of disease is thus explained, the mysterious problem is solved and our indications of cure established. All that is necessary to be noticed in the Homeopathic treatment of fevers is the cause, the local symptoms, the type and duration of the paroxysm.

CAUSES.

A great diversity of opinions exist in relation to the cause of Typhus; some maintaining that any of the ordinary causes of fever can produce it, and others again maintain that it depends upon a specific contagion or virus. It is reasonable however to suppose that miasmata or the usual causes of fever are capable of producing a low Typhoid fever, when acting upon a depressed or a debilitated system; but then it would differ widely from the contagious form of Typhus, and I am convinced in my own mind when

saying that nine out of every ten of those cases supposed to depend upon the ordinary causes of fever, are run into the low grade of Typhoid by the debilitating course of treatment pursued. Typhus is frequently generated by that species of miasmata, produced by the decomposition of human effluvia as in filthy crowded and ill-ventilated apartments in ships and jails, even in our late war it was developed in those horrible prison pens where the brave boys offered up their lives as a sacrifice to the foul atmosphere they were often compelled to breathe, even our hospitals and camps were not free from it, notwithstanding the Sanitary measures used.

Eberle, observes that the contagion of Typhus, possesses a specific tendency somewhat analogous to the narcotic poisons to benumb, or diminish the sensorial powers, and thus to depress generally all the vital energies. My experience in Typhoid fevers, confirms its contagiousness beyond the shadow of a doubt in my mind, for well do I remember a case in practice, where the husband was sick with Typhoid fever and the wife was confined with the germ in her system, and died on the tenth day in spite of the best medical council I could get from three Homeopathic physicians, and thus I am strongly lead to favor the idea of specific contagion. (I would here remark that the husband made a good recovery and that the child also lived.)

Opinions innumerable might here be mentioned in regard to the contagiousness, cause and pathology of this form of fever. Rush has known Typhus to be produced by the contagion which was left in a room six months after it had been occupied by patients ill with this disease.

Widekind states that the route of the retiring army from Poland through Germany could be distinctly traced by

the desolating train of disease it left behind.

Hildebrand thinks it does not retain its activity longer than three months.

Eberle says, and I agree with him that it can be conveyed in clothing and retains its infecting powers for a long time, and Dr. Good says, that if the clothing is clean it is never rendered infectious by this contagion. Its pathology has also caused a wonderful diversity of opinions, one asserting that inflammation of the brain constitutes the primary pathological condition of the disease; while another the lungs, others an approach to general inflammation of the mucous membrane and Broussais claims gastro-enteritis; all being equally confident and referring to post-mortem appearances for proof of their several positions. Whatever its true cause or pathological character, it is not very material so long as we are assured of its successful treatment by Homeopathy.

DIAGNOSIS.

The premonitory symptoms of Typhus are not dissimilar to those of many other fevers, such as pain in the head and pit of the stomach; loss of appetite; giddiness; nausea; weariness; and disinclination to mental and physical exertion. These symptoms generally continue from three to six days, except in childhood, when the advent of Typhoid fever is sudden, marked symptoms being developed within the first twenty-four hours; while in the case of an adult, several days elapse before the practitioner can with certainty diagnose a Typhoid condition. When the above symptoms terminate in those of the stage of invasion via, such as slight chills alternating with flashes of heat, disgust for food, nausea, and sometimes vomiting; tongue covered with a white fur; heavy, confused state of head; increased depression; and pulse small, quick and irregular. This stage continues for a few

hours and terminates in that of excitement, when the febrile symptoms increase; the face becomes flushed, skin hot and dry, lips parched, great thirst for cold drinks, bowels torpid, urine high colored, and head heavy; the patient becomes fretful, restless, uneasy, and occasionally delirious, the eyes suffused and injected, and frequently a dry cough appears, indicating some catarrhal symptoms, tenderness in the epigastrium and right hypochondriac region, and let me here add, the physician must be guarded in his diagnosis, for pressure in the right hypochondriac region will produce sensation of nausea, sometimes if pressure is continued even vomiting will ensue, and this same condition is a marked diagnostic feature of small-pox, as are all the above symptoms up to this time; this stage continues three or four days, when symptoms appear of a more depressing character, the mind becomes obtuse, pulse smaller, face flushed, dark and inclined to a mahogany brown tongue, dry and covered with dark fur, sordes on the teeth, and a dark incrustation on the lips, the hearing is impaired and there is a complete obtuseness of the intellectual faculties as the disease advances, and almost constant muttering and delirium ensue; a continual sliding of the patient towards the foot of the bed. "Subsultus tendinum;" a peculiar heat of the skin which will be conveyed to the attendant's hand when being placed on the patient, termed *Color Mordax*, the abdomen is tender upon pressure, and tympanitic; during stage of collapse the urine becomes more clear and copious, and foams like beer when voided in a vessel; the discharges from the bowels are dark, offensive, and involuntary, and are passed unconsciously; the collapse varies from six to nine days and terminates in either a slow convalescence or death. I would here remark as a guide, that the differen-

tial diagnosis in the early stages of Typhoid and Typhoid Malaria fever are, that all the foregoing symptoms exist with this exception, in Typo Malaria the bowels are *always constipated at first*, while in Typhoid fever, there is diarrhoea or irritability.

The approach to convalescence is readily distinguished by an abatement of the external heat, and appearance of a mild perspiration or uniform moisture over the whole surface, the tongue becomes moist and begins to clean up, particularly about its edges, the urine is now copious and deposits a sediment, delirium is broken by intervals of repose. In many instances the symptoms indicating a favorable crisis do not appear under two or three weeks, but generally from the thirteenth to fifteenth day. There are other modifications of Typhoid, which ought to receive a passing notice such as visceral inflammation during its early stages, inflammation of the lungs, the brain and alimentary canal; each form of course is characterized by the additional symptoms and the congestion, which is characterized by a want of febrile reaction, and a proneness to run down until the vital forces cease altogether; in the commencement of this form the pulse is small, face pale, tongue light colored, and the countenance vacant and confused; toward the close there is petechiae and a colliquative discharge, and the coma that appears at the beginning continues until the end of the disease, which terminates in death.

TREATMENT.

During the commencement when there is headache, chills alternating with flashes of heat, rheumatic pains in back and limbs, cough, restlessness at night, furred tongue, bry. and puls. in alternation. Should this not arrest the disease, and should it pass to the stage of excitement with pulse full, skin hot and dry, great

thirst, headache and sensitiveness to light, act. and bell. in alternation; give the latter drug more particularly, if in addition to the symptoms above, there should be a congested state of the head and lungs; should the symptoms still resist and increase in violence, with the skin still dry, face flushed, and rather dark tongue, dry and coated with a dark fur, mind wandering, incoherent muttering, bry. and rhus, in alternation.

If there is great prostration of strength, very feeble pulse, offensive evacuation, dry tongue and petechial or red spots or blisters containing bloody or dirty serum on the body, arsenicum.

If the more congestive form, where coma exists almost from the first and patient is in a comatose state, so that it is very hard to rouse him sufficiently to obtain even an incoherent answer, opium and lachesis.

When there is a moving and an occasional drawing up, or rather violent straightening of the legs, alternate mild and furious delirium and involuntary discharges; hyosciamus.

There are many more remedies recommended, some of which appear to me entirely unnecessary, such as: stram., lyco., phos. ac., coffee, arnica, camp., china veratrum; this last named I have used very successfully in alternation with eucalyptus when there was picking and moderate feeling of the bed clothes, or when the pulse was almost imperceptible and the patient in a perfect state of insensibility, with face either pale or dark red, and tongue blackish and cracked. The above drugs cover about all the symptoms in Typhoid fever, and bry. and rhus. will frequently arrest stage of invasion.

In using hyosciamus, great care must be taken or it will relax the bowels, if the last named symptom does not exist.

ADMINISTRATION.

Give bry. and puls. or bry. and rhus. if indicated in alternation every two hours, the other drugs when used as often as every three hours; should veratrum viride be indicated, give it every half hour, until pulse can be distinctly felt at the wrist, then extend the time one or two hours; during the course of the fever, keep the extremities warm by means of bottles filled with hot water, or heated bricks, and frequently sponge the face when hot, with warm water and bi-carb soda, and once a day the entire body, taking great care not to expose the body when bathing; sponge a small space and wipe dry as you go. Sometimes I add a little alcohol to stimulate the excretions of the skin. All sluggishness of the bowels should not be remedied "per os" but by simple enemata of warm water, since the mechanical effect of accumulating feces might constitute eventual catharsis and this would still further irritate the inflamed Peyer's patches and Lieberkuhn's glands.

DIET.

There is no form of fever, and I might say, no disease that requires so much care as this in regard to diet and particularly during convalescence; thin gruel, arrow root, rice, tapioca, ponade, toast and cracker water, are sufficient, cold water in moderate quantities; but sweet milk and fresh buttermilk I have had grand results with. In all my cases the room should be well ventilated, all excrements removed at once, and the patient not harassed by too much whispering about the room.

Headaches.

BY P. DEIDERICH, M. D., KANSAS CITY, KANSAS.
READ BEFORE THE KANSAS STATE HOMEO-
PATHIC MEDICAL SOCIETY, AT EMPORIA. KAN-
SAS, MAY 2D, 1889.

According to the statement of the venerable and eminent hero of Homeopathy, Dr. Jahr, in his "Forty Years of Practice," there is only one headache an id-

iopathic affection, and all others are symptomatic. This idiopathic form of headache is known under the names of: Megrim, Migraine, or Sick-Headache. It is a bane to women in this country, and the question "*is life worth living*" is answered emphatically 'no' by many, on account of the torture and agony inflicted upon them, through the frequent attacks of Sick-headache. Sick-headache is of a periodical character, generally ushered in by some premonitory symptoms; it is more or less unilateral and frequently associated with nausea and bilious vomiting. (Quairis Dic.) An inherited predisposition, anaemia, debility or a nervous temperament are considered the remote causes. Existing causes are prolonged mental work, mental excitement, grief, anxiety, bodily fatigue, late hours, sexual excesses, impure air, improper food, etc. Premonitory symptoms are chiefly disordered sensations and prominent among them are transient disturbances of vision. Other deranged sensations, chilliness, uneasiness, restlessness, mental depression, dread of impending evil, etc., may be present. This stage lasts half an hour or longer and then the attack of headache commences. Usually it is felt only on one side and the character of the pain is generally boring. The duration may be only a few hours, but generally it lasts twelve hours or longer.

The pathology of Sick-headache has not been demonstrated yet. and the prominent pathologist, Dr. Billroth, states: that he is tired of making the examination, because no universal pathological changes are found to be present in these cases. Opinions are that Megrim depends upon gastric or hepatic derangements, that it is a form of neuralgia, that the sympathetic nervous system is uncontrolled by the cerebro-spinal system, that it is a nerve-storm, etc. The prognosis as regards a fatal issue is favorable

but considering the suffering of the patient, Megrim is truly *grim*, and one of the *grimest* affections.

The treatment must be between as well as during the attacks. Very similar to intermittent fever the curative treatment must be instituted *during the intervals between the attacks*. If possible the predisposing and existing causes must be discovered and removed, or else all medicinal treatment avails little. When circumstances point to the impossibility of removing the causes, then indeed the chances to effect a cure are *nil* and that should be told the patient. In such cases all that can be expected is palliation, but no cure. The old school recommends the following treatment: 1st, remove the cause and then endeavor to brace up the bodily and nervous systems. Use the vegetable bitters, iron, strychnine and cod liver oil. Further, the blue pill, small doses of henbane (Hyose.) and the compound rhubarb pill, nux vomica tincture and bromide of potassium are recommended. L. & G. Homeopathy does not endorse this treatment, except only the first sentence "remove the cause." Yes, remove the cause, that is paramount in every kind of treatment, but the medicinal treatment of Homeopathy is based upon the law of Similia. The symptoms of the case objective and subjective, during the intervals between the attacks as well as during the attacks should be arranged into one picture, the important ones standing out prominently and the unimportant ones in the back-ground. Having this picture in our mind, the next step is to find a similimum of it in our Materia Medica. And that medicine which presents the closest analogy to the disease picture is the curative medicine. I wish to emphasize, getting *all* the symptoms, *between* as well as *during* the attacks. Individualization is the key to success in Homeopathy. Medicines are curative only in those

instances where the disease and medicine are similar and in all other cases there is no Homeopathy about it. The following ten medicines I have found to be not only palliative but curative in many instances: *nux vom.*, *ign.*, *bell.*, *cim.*, *gels.*, *sang. iris.*, *spig.*, *coff.* and *stan.* The general and characteristic symptoms of these medicines are in every standard Homeopathic *Materia Medica*, and a repetition of them here would be wasting precious time. In regard to the potency and repetition of the dose, a routine prescription will not do; we have to individualize again; we must select not only the proper medicine, but also the proper potency and have it repeated at the proper time. Hahnemann's general directions are: "Give one dose and wait." My experience teaches me, that in order to cure a sick headache, the medicine must be taken continuously for quite a long time, from three to six months and longer. During an attack the dose may be repeated every half an hour to an hour, and after the attacks, every three to six or twelve hours. But mark, the same medicine during and after the attack. As palliative measures during an attack, I may mention, hot or cold applications to the head, a hot foot bath if the patient is able to sit up. The patient should keep perfectly still in a darkened, quiet room. After the attacks the best sanitary and hygienic conditions should be strictly enforced upon the patient in order to effect a permanent cure.

In regard to the sympathetic headaches only a few word. Neuralgic headaches are similar to sick headaches in regard to periodicity, and they are generally unilateral too, but when they once appear, there is generally an attack every day for some time. That is a differential diagnostic feature. These headaches are very similar to intermittent fever in regard to the periodicity of the attacks. Nervous

headaches generally attack debilitated or hysterical persons. The attacks are not periodical and when they commence they may last continuously for a long time. Catarrhal headaches, as the name indicates, are caused from catarrh, either acute or chronic catarrh. Congestive headaches, from rush of blood to the head mostly in plethoric persons, and Gastric headaches are a symptom of deranged digestion, and frequently met with in those who never learn to eat and drink those things which agree with them and let the others alone. Rheumatic headaches are shifting, usually in the manner of rheumatism, from one part to another.

The Homeopathic medicines to cure these symptomatic headaches should be selected principally in regard to the cause, that is, the medicine should not only bear a similitum to the headache, but also a very close resemblance to the cause of the headache. To the above list of medicines we may add the following: *acon.*, *bry.*, *glon.*, *puls.*, *ippec.*, *merc.*, *sep.*, *sulph.* and *melilotus*. These are, with the exception of the last named, all well known polychrest remedies and will rarely fail to give entire satisfaction.

518 Mennesota Avenue.

IT AGAIN becomes our sad duty to chronicle the death of another of Homeopathy's standard bearers, in the person of the late Professor Morton Monroe Eaton. Dr. Eaton was born in Pelham, Mass., April 21st, 1839. Graduated as doctor of medicine and surgery from the Rush Medical College in 1861. He was quite a writer, and author of a work upon Gynecology; was professor of the chair of Gynecology in Pulte Medical College, and highly honored by the profession. His earthly mission has been performed, and "well done thou good and faithful servant."

**The Importance of Thorough Examination
and Diagnosis in the Treatment
of Diseased Conditions.**

READ BEFORE THE KENTUCKY STATE HOMEOPATHIC SOCIETY, BY J. T. BRYAN, SHELBYVILLE, KY., MAY, 1889.

It has been said, and I fear with too much truth, by members of the old school, that we as physicians, care little for the pathology or diagnosis, and even in our own ranks there are those confessing to as much. This paper is not presented with the hope of offering something new, but to recall to mind, and impress thereon, things we would do well to remember, to point out the danger of walking by faith rather than by sight in the treatment of abnormal conditions, and if it shall prove the means of causing one or more of us to halt when about to prescribe until the case shall have been given a thorough examination which shall direct us aright, it merits its existence. I would not be understood as advocating the selection of a remedy upon a diagnosis previously formed rather than in accordance with specific indications, for without specific medication and the selection of a remedy accordingly, the administration of drugs becomes a thing of conjecture and medicine a farce. Then to, many diseases are hours, even days in developing sufficiently for a correct diagnosis to be made, and during this time we have only symptoms to guide us in treatment, and unless they be properly recognized and estimated, we will find ourselves at sea. No less true than this proposition, is another; that there are conditions in which a correct diagnosis must be entertained before we can give relief, and it is to this fact I would call attention. And it is just here that we as Homeopaths most frequently fail and our patients slip into other hands to find relief in a short while, not because our law is faulty, not because the remedy was not

well indicated, but because our examination of the case was superficial and not thorough, and consequently our understanding of it imperfect. The law given us by Hahnemann is true, never failing in the realm of its applicability, but there is a border line, beyond which it can not be projected, which must be recognized or we will surely and justly receive the reproach and distrust of the community when the facts in the case become known, revealed perhaps by one upon whom we have been disposed to look with distrust, may be an old school doctor, and thus is Homeopathy placed in a false light and made to suffer by its own adherent. Time and time again has the most positively indicated remedy been given and failed of action, and we wonder why, wonder if the potency is all right, the different ones are tried, one giving no more satisfaction than the other, then another remedy is sought, it seems no better, another, it fails, and then we begin to murmur against our profession. What's the cause of all this disappointment? A condition beyond the reach of medicine. Unless reflex symptoms are understood as to their origin we will seldom relieve the distress they cause, and often times it takes close, careful searching to discover their source. The truth of this is forcibly illustrated by a case recently reported by Dr. Pratt, of Chicago.

A lady, aged 55, had been confined to her bed for about nine months with severe choking spells, at times threatening life, thought to be due to the pressure of a large goitre. Her only hope seemed the reduction of the middle lobe of the gland by the daily use of electricity. This failing as did all other measures, she was about to be sent home as a hopeless case when she was persuaded to see Dr. Pratt.

He found the uterine cavity filled with mucous, entrance into it having been made under an anaesthetic with much

difficulty, the cervix stenosed. The cavity was thoroughly cleansed and dilated, the bowel also dilated. The woman received immediate relief from her choking spells and was sent home in two or three weeks completely recovered. In this case there was no indication pointing to the uterus as the cause of trouble, it only being discovered by an examination. Along here let the occurrence of pregnancy during the menopause be remembered and mistake not the hemorrhage of abortion for an ordinary menorrhagia, subjecting our patient to the danger of septic poisoning from the retention and decomposition of the membranes. A mother brings her little six or seven year old boy to you. The child is pale, wan, anaemic and emaciated, poor appetite, easily fatigued, fretful and peevish, bowels constipated or the opposite condition. Cold sweat on the hands and feet at times. What is the trouble? Malaria, and so the administration of natrum, ferrum, ars, or whatever we think the best indicated remedy, is begun, but without any response, and we wonder why, until a more thorough examination reveals a contracted and irritated prepuce and with it may be, unconscious selfabuse. The former condition alone has been known to be the cause of many nervous affections of children, and Dr. Sayer of New York, reports several cases of relaxation of the muscles of the spine with curvature caused by phimosis with adhesion. Why try to relieve vesical irritation due to an urethral caruncle, or a menorrhagia due to an organic affection or a polypus, or a dysmenorrhoea, whose perpetuating cause is to be found in a papilla within the cervical canal, or a vaginismus due to an irritated hymen, or an ovaritis from constipation, here overlooking the constipation and prescribing for the ovarian symptoms or the many other affections which owe their existence to mechanical rather than

dynamic causes, by internal medication? I am satisfied there is too much blind faith in the administration of medicine in the Homeopathic ranks. For instance the waiting on hepar to open an abscess, or ars, to control a septic condition dependent on the decomposition of placental tissue within the uterine mouth or upper part of the vagina, or relying on a remedy to cure the flowing caused by a small portion of the placenta being left within the cavity. As you see gentlemen, the object of this short paper has been to impress upon our minds the great importance of appreciating the condition we are called upon to treat, and not to rely upon the efficacy of some remedy to remove reflex troubles upon the origin of which it has no bearing.

CHATTANOOGA, TENN., OCT. '89.

Dear Doctor :—At a regular meeting of the Chattanooga Homeopathic Medical Society held October 2, 1889, a resolution was adopted authorizing the Secretary to communicate with the Homeopathic physicians of this state in regard to the present law, "regulating the practice of medicine in Tennessee."

The avowed purpose of the regulars (see article in *Medical Advance* vol. xxiii, No. 1, and *Medical Era*, vol. vii, No. 8, and "Open Door of Quackery," in *North American Review*, October, 1889), is to "eradicate sects in medicine."

Are you in favor of our law as it now stands? If not, please formulate your opinion as to the best method of concentrating our influence on the next legislature for the purpose of effecting such modifications to the law as you think necessary and just, and communicate with this Society at an early date. We will inform you of the results of the correspondence and assist in any wisely directed movement. Yours fraternally,

G. E. HARRISON, Sec.,
Chattanooga, Tenn.

• • Societies • •

The Memphis Meeting of the Southern Homeopathic Medical Association.

The Association was called to order at 11 o'clock on the forenoon of the 13th instant by Dr. W. E. Green, of Little Rock.

After prayer by the Rev. J. W. Ingram, an address of welcome was delivered by Col. J. M. Keating, who tendered the visiting guests the hospitalities of the city. In the course of his remarks, Col. Keating said:

"The people whom I represent, while they have no scientific institutions, are none the less appreciative of the workings of science and of the labors and successes of the scientists of all branches who have made our age conspicuous for investigation and the sequential resultants of truth. A branch of the great American public, they believe in a fair field and no favors, and, therefore, do not concern themselves particularly about the differences and divergencies of scientific men. Nor do they harass themselves about the wars of the schools. They look for results. They welcome every endeavor that is made in the direction of truth, which they apprehend to be the end aimed at by all scientific bodies and all scientific men. The profession you represent is now numbered among the scientific. It was until recently classed among the arts, but is believed to have at last attained to a scientific basis, and it is claimed that we have the facts of medicine as of surgery. It is no longer the healer's art, but the science of healing. Members of but one of several schools of medicine, you who are here assembled to-day nevertheless share in the great triumphs referred to. I congratulate you upon them, and bid you welcome as the heirs of many ennobling triumphs, the confreres of men whose zeal

has carried them beyond the point of self-denial in behalf of humanity and far to the front for the advancement of a noble science. I bid you welcome in the name of the people and the authorities of Memphis, and of the State of Tennessee."

This address was extemporaneously responded to by Dr. C. E. Fisher, in his characteristic and happy way:

"We are here as members of a denomination in medicine having for its guiding star in the treatment of the sick the maxim, *"Similia Similibus Curantur"*—likes are cured by likes. This principle of cure was enunciated by a German physician of no little celebrity in his own school, about 100 years ago—Samuel Hahnemann by name, and for twenty years he faithfully strove to secure the adoption of this law as a precept in practice in his own school, but without success; and was finally compelled, rather than give up the principle altogether, to branch off and set up practice for himself.

The new school was introduced into America about sixty years ago, and has blossomed and grown in the North, East and West, until it has won high favor in the hearts of the people of those sections, and has received justice and recognition at the hands of many of the States in their sovereign capacity. In New York, Massachusetts, Michigan, and Minnesota, the Legislatures have placed State insane asylums under Homeopathic control, and in Michigan, Minnesota and Iowa Homeopathy has been given a separate department in the medical universities of those States, supported by State funds and under control of the Board of Regents appointed by the Governor. In other substantial ways our system has received recognition and is accorded her full and just deserts in many sections of our country."

The reading of the minutes of the fifth annual session was temporarily dispensed

with, and several minutes were devoted to receiving new application for membership, whose names were submitted to the Board of Censors and favorably reported upon, as follows:

NEW MEMBERS ADMITTED.

C. F. Ellis, M. D., Eureka Springs, Ark. A. N. Ballard, M. D., Birmingham, Ala. F. G. Hudson, M. D., Camden, Tenn. G. L. A. Lindsay, M. D., Big Sandy, Tenn. A. L. Southgate, M. D., Clarksburg, Tenn. Chas. Ziermann, M. D., Memphis, Tenn. Jesse R. Jones, M. D., Hazelhurst, Miss. W. B. Hughes, M. D., Little Rock, Ark. J. W. Burns, M. D., Little Rock, Ark. Mrs. Lizzie Gray Gutherz, M. D., St. Louis Mo. C. W. Henchman, M. D., Golden City, Mo. Wells LeFevre, M. D., Hot Springs, Ark. S. R. Mason, M. D., Duvall's Bluff, Ark.

The report of the Board of Censors was received, and the names of the new members enrolled.

THE PRESIDENT'S ADDRESS.

President W. E. Green, of Little Rock, then delivered the annual address of which a synopsis is here appended.

Ladies and Gentlemen, Members of the Southern Homeopathic Medical Association—Costum has made it the duty of the president of every association to deliver an address at the begining of its annual session. In this address he is supposed to review the past and outline the course of the future year.

It would be an act of supererogation for me to occupy the time of this learned body, with a recital of the growth and acheivements of Homeopathy throughout the length and breadth of this grand country. These facts are known to us all.

It will better suit the purpose of this paper to confine our remarks to the interests, needs and advancement of the cause in the South.

Homeopathy has had a hard struggle to secure a foothold in this bright and sunny land. Her physicians who practice here are, to a great degree, as much pioneers as were those who fought the battles in the East fifty years ago. They are few in number and are scattered over a large territory. The people are prejudiced against them, and they are hated and despised by a lurking foe that is ready at all times to take every undue advantage. The old school doctors of the South are dogmatic and domineering, and they look upon every innovation with a peculiar jealous eye. The presence of a Homeopathist is especially obnoxious to them. It is a trite saying that every person is insane upon some subject. The subject of Homeopathy seems to be the one that is most likely to aberrate the Allopathic mind. He may be rational upon all other topics, but upon this one he is always morbid. It is an established principle with the old school profession to in some way, crnsh Homeopathy out of existence, and they console themselves with the never-failing belief that it is fast dying out.

The favorite plan by which the Allopaths expect to gain monopolistic power in medical matters is by the formation of licensing boards through legislative enactments. We see them entering the Legislatures of every State in the land with some kind of a bill advocating this objectional class of legislation. These bills usually provide for an examining board that shall be made exclusively from some special society whose duty it is to pass upon the qualification of all applicants for license to practice medicine, regardless of what school or pathy they may represent. The creation of such boards, possessing such franchise, is a constant menace to the rights of the minorities. They are wrong, unjust, oppressive, unfavorable to investigation and advance-

ment in medical science, and are opposed to American principles of liberty. The ostensible purpose of these boards is to elevate the standard of medical education and to protect the public from inadequately educated physicians. In reality the motives are sinister, and the object sought is to establish so-called State medicine in this country. They hope to acquire control over all rival schools, bring the entire medical profession under the censorship of the old school societies and colleges, and thereby effectually suppress all competition in the practice of medicine. It is an established truth that laws are enacted for protection of mankind in general, minorities as well as majorities. A medical law that is really a protection to the people would be a good thing. If the regulars are sincere, and have only the interest of the dear people at heart, let them come forward like true men and consult with other schools and draft such laws as will be satisfactory and just to all, and thereby do away with the appearance of a medical monopoly. It is the duty of Homeopathic physicians to unitedly oppose, in every legitimate way, the formation of these examining boards, and to unmask the treachery, expose the selfish motives and ignoble aims of their advocates. If medical boards must be created let the representation be equal, or let there be a separate one for each school.

The organization of our members into societies will have a modifying effect upon the minds of the people. It will make us better known as a school; it would infuse life and strength into the cause, and we can as a body more effectually thwart any legislation that is unfriendly to Homeopathy. Besides the moral effect of such organization will be good. The people will become interested; they will see more of our physicians, and will know more of their ability both individually and collectively. Again, as a society we

can extend the hand of assistance to those who live in sections where our members are few and our strength is feeble.

The diseases met with in many parts of this extensive country are of a character differing from, and of a type more malignant than those found in the Northern and Eastern States. These do not especially interest the major part of the profession, and consequently are neither taught in the colleges nor discussed in the society meetings. In the Southern societies these subjects will be in common; there will be a mutual interest manifested in the investigation and discussion of these diseases, and an interchange of thought and expression that will be instructive and interesting alike to all.

For these reasons we cannot too strongly urge upon you the importance of the organization of state and county societies, and above all a strong support of the Southern Association.

Homeopathy has never gained the foothold in the South that it has in the North. Of the 12,000 Homeopathic physicians practicing through the United States in 1888, excepting Missouri, only about 375 are located with us. Why this condition of affairs exists, I will not here attempt to explain; but it is a fact that adds to our disadvantage, and it is one with which we have to deal. It is true that Homeopathy is growing. The increase in the past year in the South somewhat exceeded 10 per cent., but the growth is not what it should be, or what we ought to make it. There are many towns in the South offering good locations to well qualified physicians.

It is our duty to see that these places are promptly and well filled with worthy men. Let each member of this association use his influence to induce, at least, one or more good men, to come and locate in our midst. We can in this way rapidly increase our number, and place on a more substantial basis.

Another good plan by which we can increase our strength is to take native young men in our offices as students, and when qualified, locate them among us.

Of the fifteen colleges teaching the law of similia, not one exists in all this land of ours; of the twenty-two journals disseminating the principles of our school, we do not claim a single one. It should be the aim and effort of this society to establish a college and hospital in one of our large cities, in which our students can be taught the treatment of diseases that prevail in our section. As it is they have to go to Northern colleges and re-instruction at the hands of men who know nothing of our climate or of the diseases peculiar to it.

The *Southern Journal of Homeopathy*, the mouthpiece of this society, and the only journal in the South devoted to our cause, deserves our unqualified support, and should be found upon the table of, and read by every Homeopathic physician in the land.

REPORTS OF COMMITTEES.

Under this title of the order of business Secretary E. Lippincott submitted the following correspondence.

CHATTANOOGA, Tenn., Nov. 8, '89.

E. Lippincott, Memphis, Tenn :

Dear Doctor :—The Chattanooga Homeopathic Medical Society at its last session held November 6, 1889, passed the following resolution after considering the correspondence of the physicians of the state :

Resolved, That it is the expression of this society that the present medical bill be so amended as to establish a separate Board of Homeopathic Examiners. Fraternally,
G. E. HAMSON, Sec'y.

Dr. H. R. Stout, of Jacksonville, Fla., made verbal report of favorable progress of the profession in his city, and that a homeopathic physician had been installed

into the list of practitioners in St. Luke's Hospital, at Jacksonville.

The morning hour having transpired, an adjournment was had to 2 o'clock in the afternoon.

The afternoon session was devoted to the reading of papers beginning with the subject of "Clinical Medicine."

The first paper read was by Dr. H. R. Stout, of Jacksonville, Fla., entitled, "How I Treat Intermittents."

Discussed by Dr. J. H. Henry, Dr. Angel and Dr. A. Kilmer.

"Hemorrhagic Malarial Fever," Dr. J. H. Henry; "Eczema," by Dr. W. W. French. Dr. Holcomb's paper, "Some Suggestions on Various Forms of Fever" was read by Dr. C. E. Fisher.

Materia Medica :

"Poisoning by Kalmia ; the Therapeutics of Heuchera Americana," by Dr. E. A. Meadow.

After reading a letter from Dr. A. L. Monroe, announcing the sudden death of two of his little children as an apology for his non-attendance on the meeting, Dr. C. E. Fisher was first to express sympathy with Dr. Monroe, as he himself had lost a little son by drowning and it was more distinctly impressed upon him in the fact that Dr. Monroe was the first to express by letter his condolence.

SECOND DAY'S SESSION.

The reading of papers was continued.

Cerebral Typhoid by Dr. J. H. Lowry, was read by Dr. C. F. Ellis.

"The Hot Springs Water," by Dr. J. B. Brooks.

"Dietetic Treatment in Health and Disease," by Dr. George M. Ockford.

Addresses were next delivered by Drs. E. H. Pratt, of Chicago, James A. Campbell, of St. Louis, C. E. Walton, of Cincinnati and Moses T. Runnels, of Kansas City. Each speaker was enthusiastically applauded.

Reading of papers resumed.

"Hygeinic Aspect of Gynecology," by Dr. Sarah J. Millsop.

"Uterine Displacements," by Dr. Moses T. Runnels.

"Three Cases of Circumcision for Reflex Nervous Affections," by Dr. J. C. Daily.

"Tumors of the Neck," by Dr. C. E. Walton.

"The Male Sexual System," by Dr. E. H. Pratt.

"Skin Grafting," by Dr. J. C. French.

"Excision for the Cure of Hemorrhoids and its Comparative Merits with the Clamp System," by Dr. W. E. Green.

"The Scope of Cocaine in Orificial Surgery," by Dr. A. C. Jones.

"Experimental Surgery," by Dr. W. B. Morgan.

"The Sympathetic Nerve as a Factor in Disease," by Dr. Wells LeFevre.

"Malarial Diseases of the Eye," by Dr. James M. Campbell.

Adjourned to 8 o'clock, p. m.

The night session was consumed in the discussion of "Medical Legislation."

A committee consisting of Dr. Orme, of Atlanta; Dr. Stout, of Jacksonville; Dr. Lanzis, of Memphis; Dr. Green, of Little Rock, and Dr. Monroe, of Louisville, was appointed to formulate a protest on behalf of Homeopathy and endeavor to secure for that science equal rights before the law.

The election of officers for the ensuing year resulted as follows:

President, Dr. E. Lippincott, of Memphis.

First Vice-President, Dr. J. C. French, of Natchez, Miss.

Second Vice-President, Dr. Sarah J. Millsop, of Bowling Green, Ky.

Recording secretary, Dr. B. W. Hughes of Little Rock.

Corresponding Secretary, Dr. A. E. Meadow, of Blocton Ala.

Permanent treasurer, Mr T. Engelbach, pharmacist, of New Orleans.

The Board of Censors is composed of Drs. I. W. Buddeke, of Memphis; G. M. Ockford, of Lexington, Ky., and A. N. Ballard, of Birmingham, Ala.

Birmingham, Alabama, was elected as the place for the next meeting, which will take place, beginning on the second Wednesday in November, 1890.

The personnel of the convention is decidedly good. The members are enthusiastic in the work of the association, are well dressed and well fed, and present the appearance of being well thought of and well cared for by their patrons.

Dr. Hughes is an efficient Secretary, and his courtesies to the reporters of the press were duly acknowledged.

One of the most distinct and easily understood readers on the floor was Dr. Lizzie Gray Gutherz, the lady delegate from St. Louis.

Dr. E. Lippincott, as Secretary, labored faithfully to secure a good attendance, and his work seems to be appreciated by his colleagues.

Dr. Pratt is a gentleman of good address, a ready speaker, every word he utters carrying with it the emphasis of earnestness and honest conviction.

Prof. J. M. Campbell, the delegate from the Missouri Institute of Homeopathy to the Southern Association; he is a polished and cultured gentleman, and a pleasant speaker.

Dr. S. M. Angel, of New Orleans, La., is one of the pioneers in that city, and has fought through many epidemics of yellow fever with a success that justifies him in proclaiming homeopathy good enough for him.

Five lady members of the association appear by their names in the list of papers to be read during the session. Two of the ladies were present.

One of the late arrivals yesterday was Prof. C. E. Walton, of the Pulte Medical College of Cincinnati, who occupies the chair of surgery in that college. He is said to be an accomplished and skillful knight of the scalpel.

Prof. E. H. Pratt, of the Chicago Homeopathic College, is one of the ablest surgeons of the new school, and is recognized as one of the self-made men and acknowledged leaders of the profession. He is a vigorous speaker and a valuable worker.

Dr. W. E. Green, of Little Rock, the President of the association, is the leading homeo-

pathic physician of his State, and stands high in his city professionally, socially and as a business man. He is one of the leading surgeons of the South, and has no superior as a successful and daring operator.

Dr. H. R. Stout, of Jacksonville, Fla., is a very active devotee of the new school, and watches carefully after her interests in that State. His colleagues give him credit for having saved the rights of homeopathy before the law in Florida, by securing the creation of a Homeopathic State Board of Examination to look after the affairs of the new school in that State.

Dr. C. E. Fisher, who delivered the response to Col. Keating's welcome address, is the peer of any in the profession in interest in its cause. He is perhaps as thoroughly posted in the matters of the new school practice as any in attendance, quick to meet an argument and unyielding in his opinion on questions raised during the progress of the proceedings.

A more intelligent looking body of gentlemen were never assembled in any cause in this city than are to be seen at the sessions of the homeopaths. Some of them appear nearly as old as their profession, and seem to cling to it with all the ardor and zeal that characterize the younger members.

In the list of practitioners who have presented papers on various subjects for the consideration of the association appear five by ladies. Two of these are from Chicago, one from Bowling Green, Ky., one from St. Louis and one from Fort Worth, Tex. They are Dr. Sarah J. Mill-sop, of Bowling Green; Dr. Lizzie Gray Guth-erz, of St. Louis; Dr. M. Ellen Keller, of Fort Worth, and Drs. Julia Holmes Smith and Lucy Waite, of Chicago.

It was a very pretty compliment paid to Mem-phs by the homeopaths in electing a Mem-phs physician president of their southern or-ganization. While it was a tribute of respect to the man, it was not less an expression of their appreciation of the hospitable treatment they were accorded while in the city. It is a pleasure to know that they found their stay so agreeable and that they will have good words to say of Memphis when they return to their homes.

To the homeopathic Profession of Texas.

The state society meets at Waco, the second Tuesday and Wednesday in May, 1890. It is time for active work to begin for our next session, and your secretary most respectfully urges you to use your earnest efforts from this time, toward the advancement of our combined interests. Begin to prepare your papers and the

chairmen of the different bureaux see that those who are on their respective bureaux are at work. If you know of any physicians in the state who are not members send their address to the secretary at once.

The following bureaux have been an-nounced :

Materia Medica :—Drs. H. C. Morrow ; M. A. A. Wolff ; J. G. Achenbach, and Turtius Marks.

Practice :—Drs. G. H. Sherbino ; Frank Hines ; T. H. Bragg. and J. Thatcher.

Surgery :—Drs. Joseph Jones ; J. R. McKenzie ; J. R. Pollock, and G. G. Clifford.

Obstetrics :—Drs. A. T. Hall ; J. W. Barrett ; H. G. Bayliss, and S. W. Cohen.

Pædology :—Drs. J. W. Dickey ; M. J. Bleim, and P. Stammer.

Gynecology :—Drs. Ellen M. Keller ; W. F. Thatcher, and C. E. Fisher.

Ophthalmology :—Drs. G. St. Clair Hus-sey ; E. S. Evarts ; H. B. Stiles ; H. F. Fisher, and E. E. Davis.

Institutes :—Drs. T. G. Edwards ; W. Y. McKenzie, and Thomas Houghton.

Legislation :—Drs. G. G. Clifford ; Jo-seph Jones : Tertius Marks ; T. H. Bragg H. F. Fisher.

G. G. CLIFFORD, *Sec'y.*,
San Antonio.

Suicide.

EXTRACTS FROM AN ADDRESS BY DR. WM. B. CLARKE, OF INDIANAPOLIS, IND.

Suicide is not necessarily "a malady of cultivation," a peculiarity of the present time, or always caused by insanity. We may just look at the writings of its more prominent apologists, like John Donne, Dean of St. Paul's (whose "Biathanatos" was published in 1644), the Swedish phi-losopher, Robeck (1836), and Grotius and Puffendorff during the Reformation time (though Luther condemned the prac-

tice). In England it was upheld by Locke and Hume (the latter published in 1783). Rousseau and Voltaire wrote on the subject, and Voltaire once made an appointment to commit suicide and backed out. Then came the "literature of despair,"—of Senancour, Schlegel, Jean Paul, Byron and Goethe, the latter's great "Werther" being "a faithful representation of the moral experiences of the period. Goethe, Germany's greatest imaginative writer and poet, once made a study of the suicides of classic history, selected Otho's choice, and tried it several times, but failed; then, laughing the whole matter off he took a vow to live. In that masterpiece "Faust," he teaches a great moral lesson in having Margherita beat the devil in refusing to commit suicide, preferring to endure her shame and suffering while waiting, even longing, for death—and her reward is translation in the arms of angels. The treatment of suicides by dramatists is a study in itself. The terrific one of Othello, as shown by Booth and Salvini, will haunt the memory of every one who has seen it. Romeo and Juliet were "untimely cut off." But the immortal bard made the ambitious Richard fight to the end, though once "By the apostle Paul, shadows to night have struck more terror to the soul of Richard than can the substance of ten thousand soldiers, armed in proof, and led by shallow Richmond!" Chatterton and the painter, Hayden, suicided. Cowper attempted it, and Crabbe and Hugh Miller came near it, as did the great master of music, Beethoven, because of deafness.

Suicide, as has in effect been said by an able writer, presupposes

TWO NECESSARY CONDITIONS—

moral and physical impressions derived from without, and a nervous impressibility which magnifies and distorts them and gives them dangerous power to affect hap-

piness. Though in forensic arguments an attempt at suicide is usually held to be *prima facie* evidence of insanity.

AMONG THE CAUSES OF SUICIDE may be placed hereditary tendency, education (or want of it), certain literature, financial losses, etc., love troubles and jealousy, ill health, temperament, insanity, abuse of stimulants, (especially by persons who have suffered from sunstroke or severe blows on the head, as great cerebral irritability is easily produced in such persons), regular gambling, and in this era of greed for wealth and the wild speculation attendant thereto, the reaction following the struggle therefor causes many when the disappointment of failure is fully realized, and sudden riches sometimes cause it. An unhappy childhood may be an important factor, so we must, say with Sydney Smith, "If you make children happy now you will make them happy twenty years hence by the memory of it." Dr. E. H. Clarke, in his excellent book "Sex in Education," thinks children should avoid intellectual competition at school, especially among girls. But we have not space to refer to the influences of race, sex, occupation and many other items, nor much to diseases, even though the condition often called "malaria" deserves an extended mention. Few consumptives commit suicide, hopefulness being such a prominent and sustaining characteristic of that disease, in marked contrast to those having liver or "malaria" troubles, fully justifying the witty *double entendre* reply to the question "Is life worth the living?" as follows: "That depends on the liver."

The imitation or mental contagion influence is the match that fires the magazine in many cases, and it is very doubtful if the extended newspaper references given such cases is wise. But can such reference be curtailed? The New York laws provide that reports of hangings shall not be published, but the World says it defies them.

New York Homeopathic College and hospital.

This institution has signalized the thirtieth year of its existence by the erection of a large and admirably arranged college building for the use of its students, and a fire-proof free hospital for practical instruction in surgery. The college building forms the centre of a proposed group of buildings, which are intended to occupy the whole plot of ground on the Eastern Boulevard for two hundred feet, having a depth on Sixty-third and Sixty-fourth streets nearly equal to this. The Flower Hospital, standing on the southeast corner of this plot of ground, is to be enlarged, by the erection of a wing on Sixty-third street; this hospital building will be balanced by another on the corner of Sixty-fourth street. Besides these other minor buildings will be erected as funds can be procured.

The college building has a width of forty-eight feet and a length of one hundred and ten. The part of the building devoted to the out-patient department is forty-four feet square within the walls, and consists of one large and five smaller examination rooms, with a separate waiting room for women, and a hall large enough to serve as a waiting room for men; in addition to these, there is a pharmacy, which is of sufficient size to answer all the purposes of that department of the administration. Back of this there are two main entrances to the building, one to the north, intended for the students, and leading directly into the spacious hall, from which a broad staircase mounts to the top of the building. From the hall leads out an assembly-room for students.

On the first floor the end of the building toward the boulevard contains the laboratory, twenty-four feet by forty-four, the space for the furnaces being screened off at one end to protect the tables from the heat and from interruption. Besides this, and partly communicating with it, is the Junior lecture-room, twenty by thirty feet, and communicating with the chemist's room, or a private room for the chemical lectures beyond. On the second floor the whole space to the east of the staircase and doctors' rooms is devoted to the great lecture-room, forty-four feet square, and with steep incline to the auditorium. The space below this rapidly sloping floor is utilized for the Histology Department, with large windows fronting north, and with rooms for a series of alcoves for separate microscopical research, to-

gether with cases sufficient for apparatus and specimens.

From the third-story hall the dissecting-room is entered on the east. It is forty-four feet square occupying the whole space above the great lecture-room, and lighted by windows high in the gable wall, fronting toward the boulevard, and by dormer-windows in the roof. On the third floor, to the west, is, in the first place, the entrance to the uppermost seats of the anatomical theatre, and also a separate entrance to a series of special observation-rooms, which are hung in the air, as it were, above the demonstrator's table, the great height of the theatre having made it unnecessary to leave all the space free above the heads of the lecturer and his class. These rooms fronting the south, will be used by the Department of Experimental Pharmacology.

The building is fire-proof, as by law it has to be, and as assuredly it ought to be. In the halls and staircases and in the basement there is absolutely nothing that could take fire, no combustible material of any sort, and the roof is entirely fire-proof. Whatever wood is used in the fittings of the rooms is so isolated and so encrusted in solid masonry that it is, in the first place, as nearly removed from the danger of catching fire as may be, and secondly, is absolutely prevented from communicating fire from one part to another.

The Flower Hospital, which is an entirely separate building, communicates with the college by an underground tunnel, which has for its chief purpose the communication between the elevator in the hospital and the pump, etc., in the basement of the college. Otherwise there is no communication between them, the hospital having its own entrance.

The history of this institution deserves more than a passing notice. It was chartered as a regular school of medicine, and its students receive the regular degree of doctor of medicine. It was the first, and for many years the only, medical college in New York to require of its students a three-years' graded course of lectures as well as a preliminary examination to test the fitness of those desiring to study medicine, and reject the illiterate. The course of instruction is complete and thorough in every department of medicine and surgery. Great efforts are made during the first years of the students' work to provide ample facility for laboratory work in medical chemistry and sanitary science. During the succeeding years the advanced students

have abundant opportunities for studying diseases in the out-patient department connected with the institution, at the bedsides of patients in tenement houses, and in the surgical hospital.

This institution expects to establish an ambulance service in connection with its free hospital. It hopes also to have maternity and medical hospitals equipped and endowed, to render the education of its students still more thorough and complete. The wealthy friends of the school so far have contributed generously for the purchase of property and the erection of the present buildings. The ladies also have worked zealously in its behalf, and the trustees have large hopes for the future. Laboratories for sanitary science, bacteriology, and especially for pharmacology (the knowledge of drugs), are needed. For the last mentioned study a great future is opening. The discovery of new remedies for disease will occupy the time and talents of our best minds, and were the equipment and support of such a laboratory assured, a few years would witness brilliant results.—*From Harper's Weekly, Nov. 2d.*

A Little Anecdote of Constantine Hering.

Constantine Hering in his young years practiced in Germany, where he often traveled through the country on foot. On one of these journeys the Lord of the village invited him to stop with him. The Lord inquired his profession, and when Hering told him he was a physician he made a wry face and turned from him. Hering remarked, "I see you do not like us." "No," was the reply. "If I had a son he should learn the lowest trade before he should be a doctor." "You must have reasons for that," was Hering's reply. "I have," he said, "and I will tell you." He brought a large book and placed it before Hering, and said, "Here you see I have consulted four hundred and seventy-seven physicians, and no three agree as to the nature of my disease." When he was first taken sick he employed a skillful doctor, without benefit, then he employed a second one. After long treatment without relief, he invited them to his house. He then required an examination from each of them and their diagnoses, which were different. As these learned men could not agree he dismissed them and quit doctoring; but still as his disease was troublesome, he concluded to find three doctors who should agree, and then he

would employ them. He then traveled two years through Europe visiting the great cities and consulting every distinguished doctor.—When he had consulted four hundred and seventy-seven he had not found two who exactly agreed. "How can I avoid contempt for the profession?" said the Lord.

Dr. Hering agreed to bring him three, provided he would spend two hundred dollars. The Lord agreed to do it, more out of curiosity than anything else. Then Hering diagnosed his disease and took down his symptoms. He requested the Lord to make a copy of the symptoms, and to inclose in each copy a five dollar gold piece and to send one to each one of thirty-three homeopathic physicians, that number including all in the practice of homeopathy at that time. As they were scattered Hering gave the name of each and left.

A year and a half afterwards Hering received a large quantity of wine and a letter from the Lord, who expressed his thankfulness for his good advice, and told him that he had received an answer from every one of his letters, and that twenty-two of the doctors agreed exactly, not only as to the disease, but in regard to the remedy, which was more than he ever expected. He took the remedy prescribed and was cured. Fearing he might again fall into temptation and bring back his trouble he wished to present Hering with all the wine in his cellar.

—*Dr. Pepigras.*

AMERICAN INSTITUTE OF HOMŒOPATHY.—Dear Doctor: As the rule, requiring each bureau to work on a "Special Subject" selected at the beginning of the year, has been repealed, and as each bureau member is now left more free in his choice of a topic, may I suggest for the coming year, each bureau member ought to make a special effort to make the new rule a success, lest it may fall into discredit upon its first trial. It would be well, then, if each member should select his individual subject early and devote unusual care and labor to its preparation, not, of course, by the addition of more "book learning," but by making the essay an exposition of its writer's own thought, observation and experience. Hoping you will pardon this suggestion from an interested member of the Institute,

I am yours truly, PEMBERTON DUDLEY,
General Secretary.

The Regular Doctor's Soliloquy.

BY G. M. COFFMAN, M. D., GARDEN CITY, KANSAS.
READ BEFORE THE KANSAS STATE HOMOEOPATHIC
MEDICAL SOCIETY, AT EMPORIA, KANS. MAY 2, 1889.

What direful fate is this that frowns on me ?

For many moons gone by, I've had no fee.

Is it because these fools who have their ills,
All want cursed homeopaths, and little pills ?

My reason reels, with this black infamy ;

My soul revolts at such calamity.

Must I, the learned apostle of learned schools,

Be humbled by these vile, dog-matic fools ?

But no, I must not fret with impious rage,

But don the visage of an injured sage.

I'll meditate on our illustrious past ;

And think of all those solons of our caste

Who once had filled the earth with their renown ;

Whose brows have worn the treasured ivy crown.

Of all this glorious line of "regulars"

Whose noble deeds are told in golden verse,

Pythagoras achieved the greatest fame ;

High over all he wrote his honored name.

He purged and sweat, and salivated men,

With all the skill and tact of human ken.

He knew his CODE OF ETHICS "like a book,"

And passed all homeopaths with scornful looks.

He cared not for his luckless patient's groans,

He got his dimes, the grave-yard got his bones.

But now, O age of regenerate sin,

These homeopaths get all our patients "tin."

Hippocrates, whose fame the gods extol,

Transcribes his name on this immortal roll.

His nostrums, made with pharmaceutic skill,

Like modern drugs, were warrant to kill.

Phlebotomy, invented by this sage,

Has had its rise and fall in every age,

This innocent device, though rather quaint,

Has peopled Paradise with many a saint.

There's Galen too, who was of great repute ;

That he was orthodox, none can dispute.

He used his powders, poultices and pills,

His gargles, lotions, baths for all men's ills.

He viewed "irregulars" with great disdain ;

Their black, unholy arts, he called profane.

There's Harvey, Hoffman, Hunter, and Pasteur,

What monarch's lineage is more nobly pure ?

Thus I'm descended from illustrious sires,

Whose very name, the loftiest zeal inspires.

I am the champion of the "regulars,"

That honored school whose wisdom never errs.

A school which has, by searching every fact,

Made medicine, a science most exact.

Pathology, (to man the greatest boon,)

We ascertain by phases of the moon.

Our therapeutics are as near precise,

As winning poker chips, or throwing dice.

Flint says: "In croup, no remedy's more sure,

Than skunk grease to effect a speedy cure."

"In simple Croup," says Doctor Bartholow,

"To make a cure, vile skunk grease is no go."

Nosology, we've long since figured out ;

In our prognosis there's no room for doubt.

With array of scientific lore,

With such a glorious past, who dare ignore

This great fraternity of "regulars" ?

Who dare employ these homeopathic "cours" ?

But yet, with all our puff, and pomp, and pride,

These small pill fiends are still unterrified.

They give their "moonshine," and their purses swell,

And all their patients, by strange chance get well.

When men get ill, for homeopaths they call,

When "kids" get sick, for little pills they squall.

It seems that by some strange fatality,

No one gets sick in my locality.

Is there no way to right this monstrous wrong, ?

No way to guard the weak against the strong ?

Me thinks I have it now—a conjurer's trick ;

We'll frame a bill, and legislate them sick.

And then, if they these homeopaths employ,

(Those charlatans whose art is to decoy ;

Why then, we'll draft, (we never have refrained,)

A bill: To have the homeopaths restrained.

THE CHROME-WATER TREATMENT OF SYPHILIS.—Dr. Güntz, of Dresden, again brings to the notice of the medical profession the virtue of this, his method, of treating syphilis ("Allgemein. Wien. Med.-Zeit.," 1889, No. 14 *et seq.*) The impossibility of finding any universal remedy for this disease is granted, and the oft repeated failure of mercury to accomplish a cure is fully dwelt upon, while it is not denied that often it does excellently well. But, alas! it sometimes is in itself responsible for the death of a patient! This it does by causing a disintegration of the tissues. Against this, chrome-water works, and, when used with discretion, it will save from death many a person with malignant syphilis. Chrome-water gives the patient a blooming appearance, in marked contrast to the "cheesy" look of him who imbibes mercury. The weight of the patient is reduced, but when its use is combined with that of salt-water baths, extreme thinness is not attained. Never does "that dangerous fatty degeneration" take place that is so often seen with quicksilver after many months or years of small doses. While eighty-two per cent. of the patients treated with mercury suffer with relapses, chrome-water is often abortive in the stage of the lesion. It is always efficient. Under its use syphilitic parents beget sound children. You can get this wonder-working water of a certain apothecary in Dresden, and there too, you may find its enthusiastic inventor. *N. Y. Med. Jour.*

Book Review.

A Text-book of Animal Physiology with Introductory Chapters on General Biology and a Full Treatment of Reproduction. For Students of Human and Comparative (veterinary) Medicine and of General Biology, by Wesley Mills, M. A., M. D., L. R. C. P. (Eng.), Professor of Physiology in McGill University and the Veterinary College, Montreal. Over 500 Illustrations. D. Appleton & Company, New York, are the Publishers.

Recognizing the tendencies of the student of physiology to draw conclusions for various organs (and functions) as though applied to that portion of the animal kingdom wherever these organs are found, the author has written this comparative work to do for physiology what has been done for morphology.

While what is strictly applicable to other animals and to the human anatomy has not always been kept apart, cautious conclusions have been drawn—an effort is made to show the dependence of all parts of the economy and to correct the impression of independent functions of the body. The work is a very readable production and one from which a great deal of valuable information can be gleaned. It is concise yet replete.

Physician's Pocket Reference Book and Visiting List for 1890, by J. H. Chambers & Co., St. Louis, Mo. Contents :

Calendar Prediction of date of confinement, artificial respiration, care of galvanic batteries, disinfectants, clinical examination of urine, chemical examination of urine, poisons and antidotes, table of doses, blank leaves for calls, memoranda, addresses, records of cases, etc. Pocket size, price 75c net.

Essentials of Pathology and Morbid Anatomy, by C. E. Armand Semple, B.

A., M. B; Cantab.; M. R. C. P., London. With Forty-six illustrations. Published in the U. S. A. by W. B. Saunders, 913 Walnut Street, Philadelphia. In this small work the author devotes considerable space to the consideration of Bacteria, as the prominence of this subject of late years has made this a necessity. Again, Urinary Pathology, which is usually omitted from works upon General Pathology, though of much importance, is given its full quota of space. The work is a practical one, especially for the busy practitioner who has not the time to devote hours to the study of his cases.

Ruddock's Family Doctor. A Popular Guide for the Household, Gives the History, Causes and Means of Prevention and Symptoms of all Diseases of Men, Women and Children, Methods of Treatment, etc., by E. Harris Ruddock, M. D., Licentiate of the Royal College of Physicians, member of the Royal College of Surgeons, etc., with Notes and additional Chapters by James E. Gross, M. D., member American Institute of Homeopathy; Western Academy of Homeopathy, and Illinois Homœopathic Medical Association. The object of this work is to supplant those domestic drugs, such as castor oil, rhubarb, chloral, potassium, etc., to be found in most every household, by better or reformed treatment, more properly Homeopathic treatment.

Special attention is given to the consideration of Hygiene and Dietetics. The book is practical and will be an honor to any library. Price \$2.00; Messrs. Gross & Delbridge, 48 Madison St., Chicago, are the publishers.

A Reference Handbook of the Medical Sciences, embracing the entire range of scientific and practical medicine and allied science. By various writers. Illustrated by chromolithographs and fine wood en-

Southern Journal of Homeopathy

NEW SERIES
NO. 11

San Antonio, Texas, December, 1889.

OLD SERIES
NO. 73.

• • Editorial • •

The Southwestern Asylum.

Anent "The Southwestern State Lunatic Asylum" the laws governing the same are herewith appended. The salary of the *superintendent* is \$2000.00 per annum. This officer must reside with his family in the asylum building. The JOURNAL suggests that immediate action be taken in this matter, as proposed by Dr. Fisher in our November issue.

Gentlemen of the Homeopathic profession, give this matter serious thought. There are many capable men in our ranks for the position and every one should take an interest in securing the asylum for the Homeopathic profession. Concerted action should be taken and at once. The first superintendent is appointed by the governor. What arguments and pressure can be brought to bear upon our executive is the question? Why, this: Each Homeopathic physician circulate a petition (praying the governor to appoint a member of our school to the superintendency, at the same time setting forth in a memorial the claims of our profession for said appointment), in his community and get all the good signatures threeto he can and at the proper time and in a proper way present them to Governor Ross. A general head or bureau should be established. Will our President act? Our

columns are open to all, and our services can be commanded.

Art. 67. *Control vested in Board of Managers.* The general control, management and direction of affairs of the Texas asylums for the insane shall be vested in a board of managers to be styled the board of managers of the lunatic asylums, subject only to such rules and regulations as may be prescribed by the legislature. Three of the members of each board shall reside within five miles of their respective asylums.

Art. 68. *Board of Managers, constituted how.* The governor shall appoint for the lunatic asylum and each branch thereof a board of managers consisting of five members, who shall hold their terms of office as follows: two shall hold their office for two years; two for four years and one for six years, or until their successors are appointed and qualified; and whenever a vacancy occurs in said boards it shall be filled by the governor, and the term of office of the person so appointed shall be for the unexpired term of the person whose place is made vacant. The board of managers shall be appointed by the governor, by and with the advice and consent of the senate.

Art. 68a. *Compensation of Members of Board.* Each of the members of the board of managers shall be paid five dollars per day and five cents per mile for going to

and returning from the asylums for the purpose of holding their monthly meetings, provided for by this act, and no member shall be paid, except in case of his actual attendance on said meetings; and the certificate of the president of the board of managers, approved by the superintendent, shall be a sufficient voucher for the comptroller to draw his warrant upon the treasurer for the amount due each member of said board for his attendance on said meetings; *provided*, no meeting shall be for a longer time than one day.

Art. 69. *Organization of Board of Managers.* The board of managers shall choose one of their number president, and the superintendent of the asylum shall be *ex-officio* secretary of the board. A majority of the members of the board shall constitute a quorum for the transaction of its business.

Art. 70. *Meetings and Record of Board of Managers.* The board of managers shall hold monthly meetings at the asylum, and a full account of all their acts and proceedings shall be recorded by the secretary in a book to be provided for that purpose.

Art. 71. *Qualification and Powers of Board of Managers.* The members of said board of managers shall be persons distinguished for their philanthropy, and when appointed in accordance with this act, they shall have the general direction and control of all the property and business of the asylums, in accordance with the requirements of the law, and in all those cases not provided for by law, they shall have such direction and control of the property and business of the asylums according to the by-laws, rules and regulations of the asylums. They may take and hold in trust any gift or devise of real or personal estate for the benefit of said asylum and apply the same, as the donor or deviser may direct.

Art. 72. *Powers of Boards of Managers.* The board of managers shall have power

1st. To make all necessary by-laws and regulations not inconsistent with the constitution and laws of this state, for the government of their institutions, officers, employes and inmates and for the admission of visitors.

2d. To determine the salaries and wages of all officers and employes of the asylums.

3d. To discharge upon the recommendation of the superintendent, any officer, employe or patient in the asylum.

4th. Upon the nomination of the superintendent, to appoint the assistant physicians, steward, matron and apothecary to the asylum.

5th. To examine the accounts and vouchers of the superintendent and to reject or approve the same as they may deem right and proper.

6th. To exercise a careful supervision over the general operations and expenditures of the asylums, and to direct the manner in which its revenues shall be disbursed.

7th. They shall also cause to be kept a clinical record of all cases admitted in the asylums.

Art. 75. *Election and Qualification of Superintendent.* The board of managers of the lunatic asylum shall elect a medical superintendent of their respective asylums, who shall hold their offices for two years. He shall be a married man, a skillful physician, and also experienced in the treatment of insanity. He shall reside at the asylum with his family, and shall devote his whole time to the duties of his office.

Art. 76. *Qualifications of Superintendent.* The superintendent shall be a married man and a skillful physician, and also experienced in the treatment of insanity. He shall reside in the asylum with his

family, and shall devote his whole time exclusively to the duties of his office.

Art. 77. *Oath and Bond of Superintendent.* The superintendent shall, before entering upon the duties of his office, take the oath prescribed by the constitution for all officers of the state, and shall enter into bond in the sum of ten thousand dollars, with two or more good and sufficient sureties, to be approved by the treasurer of the state, payable to the state and conditioned for the faithful performance of his duties as superintendent.

The Journal's New Home.

Its "we" now; the fact is, that since the JOURNAL came into my hands there has prevailed a lonesomeness over my mind, such as I imagine often comes on the cast-a-way who finds himself alone and separated from his kind. Nearly all of my contemporaries in speaking of their publication wrote "we," whereas I could never see my way clear to doing the same thing at all times, because there was only myself to speak of, unless the office boy who did the "heavy work" could come in as part, to make up the plural. But "Bishmallah" the load has at last been lifted, and now we can say WE with the very best of them. And to explain: you all know that when I bought the JOURNAL from Dr. Fisher, it was only because no one else in Texas, or for that matter, in the South, would do so. I had no idea of holding it very long; it was on my part only a temporary taking hold until some one more experienced could be found to run it, *and run it in the South at that.* It was, and is, my determination to keep it here at all hazard, and here it must stay, as long as it is in me to keep it. You may all rest assured that it was with a good deal of fear and trembling that I assumed the responsibility of the concern, but as no one else

would, why I was just forced into it; but to you my friends, who have stood by me are due the thanks of having supported it through the trial and ordeal of making a complete success of what was to me a very grave venture, which even now, on a backward glance seems foolhardy, and excusable only by reason of my youth: but as time crept on, and I received from every quarter kind words and encouragement, I was emboldened and in time gained confidence in myself, and I now feel as though the JOURNAL can hold its head up with any of its mates.

But pardon this digression; I could not help taking this opportunity of thanking you all, my friends and supporters.

As I said at the beginning, ~~we~~, well then "I" feeling lonesome, concluded for the benefit of the patrons of the JOURNAL, as well as all others concerned, to remove its home to New Orleans, where it will be more central in its location and where it will receive better attention generally, than I could possibly give it here. So that having these and other ends view, I negotiated the sale of the JOURNAL to Dr. T. Engelbach, of the Homeopathic Pharmacy, who is now the owner, but, I still hold the fort as General Editor, and will continue to do so.

The next issue (January, 1890,) will be made up from New Orleans, and the writer hopes our plant will continue to grow and improve in its new soil as well as it did in Texas. And should it do so the time is not far distant when the JOURNAL will be the peer of any medical publication in the country.

In our last issue, we were a little premature in *locating* Dr. C. E. Fisher in San Francisco. The doctor has not yet decided whether he prefers the extreme *west* to the *sunny south*.

The Alabama Outrage.

And now comes the *wise* and wily old school and so-called *regular practitioners of medicine*, in Mobile, Ala., who in open court (because the majority oppresses the minority among the medical men in that city), asks that two upright and honorable young practitioners of honest medicine, be inhibited from practicing their profession and that they, those in jeopardy, be punished for past sins, *i. e.*, of relieving the ills of suffering humanity.

Ye Gods! will the good people of Alabama permit such indecent outrages, or will they rise and assert their dignity and cause the immediate release of those two disciples of Hahnemann? We are of the opinion that such will be the course pursued by the courts of justice, before which tribunals the cases are now pending.

It appears that these *would-be* and *arrogant regulars* have not been soundly thrashed within the last two years and in consequence have become saucy. Never mind, my little fellows, we will lay it on heavier each time, and the sooner you succumb to the inevitable the better it will be for you.

The following correspondence is self-explanatory:

Editor Advertiser:

You will see from the letter of Dr. Geo. G. Lyon, of Mobile, Ala., two Homeopathic physicians of the state have been arrested for practicing, although both are graduates of the best Homeopathic College of the United States. Dr. Lyon is a son of Hon. George G. Lyon, of Demopolis, one of the best legal men of our State.

Dr. Meyers lives at Whistler, near Mobile. They will fight the old school Medical Law of Alabama, backed by the Homeopathic profession of the United States.

An effort is now on foot to raise money to employ the best legal talent of the state to take the cases up to the Supreme

Court. If we fail in the State Court, we will take it to the Supreme Court of the United States. For our rights as a school of medical practice, we must and will contend. We ask nothing more than justice. Give us an Eclectic and Homeopathic physician on the state board of examiners—this we must have. If not, we will contend for it as long as we are citizens of free Alabama.

JOHN H. HENRY, M. D.

The following is the letter from Dr. Lyon to Dr. Henry, of this city:

"MOBILE, Dec. 6, 1889.

"JOHN H. HENRY, M. D.,

"DEAR DOCTOR—I have just been arrested for "practicing medicine without authority of the law," and think I will fight them to the bitter end. Do you think the American Association would back me in making a test case of this? I mean to test the constitutionality of the law. If you think they would lend me any aid, will you be good enough to write to the Secretary of the Association and state the facts and ask their co-operation in the matter? Dr. Myers, of Whistler, has also been arrested. I have made up my mind not to be imposed on, and will stand my ground. I have a better case, I think, than they have any idea of.

Yours fraternally,

GEO. G. LYON, M. D."

LOBELINE:—The alkaloid of lobelia inflata, lobeline, belongs to the group of volatile alkaloids, but its chemistry and pharmacy, as well as physiological effects, have received little attention. It has been claimed that it possessed properties analogous to coniine and nicotine, two sister volatile alkaloids, and by analogy emetic and nauseant qualities have been ascribed to it. Recently it has been credited by Dr. Silva Names with great value in asthma, in doses of about one-sixth grain, gradually increased until six grains were taken at a time, even in which dose no toxic effects were noticed. Subcutaneously it produces no untoward symptoms. The alkaloid was not found to possess emetic or nauseant qualities. In asthma its effects are said to be permanent, and it is also thought it will be found serviceable in tetanus and like convulsive diseases.—*Indiana Pharmacist*.

• • Surgery • •

Experimental Surgery.

BY W. B. MORGAN, ST. LOUIS. READ BEFORE
THE SOUTHERN HOMEOPATHIC ASSOCIATION
AT MEMPHIS, NOVEMBER, 1889.

For present consideration surgical cases may be divided into classes—those demanding immediate operation, and those in which the propriety of operation and the time for doing it are open to question. It is of the latter class I wish to speak. It may be said that no two cases are alike—that every one is a law unto itself, and that nothing like definite rules for general application can be laid down, but is it so? Antiseptic methods and other recent improvements have turned the heads of many within and without the profession, and there seems to be no limit to the things that are undertaken. We continually read of achievements that discount all previous reckoning and give a flattering sense of progress, but an occasional glimpse behind the scenes sets some of us to thinking. A considerable number of these astonishing innovations are reported from private institutions in New York. As much noise as possible is made over the brilliant successes, and the outside world is made to believe that almost any conceivable operation may be done with safety, but it leaks out through a different channel that the authorities are trying to suppress or find some adequate means of regulating these same institutions, because of the frightful mortality from operations done in them. Their irresponsible managers are experimenting, and at the cost of many human lives. Progressive surgery is not confined to New York, either. The push and enterprise of western men impel them to, at least, keep up with the procession. St. Louis has at least one man who never misses a chance to operate for any such trifling

consideration as the probable killing of the patient, and his sometimes brilliant successes give him lots of business. Fortunately the native timidity of most people insures their safety but there are a good many who have blind faith in the doctor. There is still another class whose philosophy is such that with a full understanding of the risk, they will insist on really hopeless operations as a way of escape from expected sickness and suffering and to enforce their argument will tell the surgeon applied to, that if he will not do as they wish they will go to some one who will. The fee and eclat from a possible success tempt the surgeon to do what his judgment condemns, and he often becomes, to put it mildly, the instrument of suicide. A little plainer name for the act would be homicide.

It used to be the custom in some countries to kill the deformed, the hopelessly sick, and the aged; but except in the manner I have indicated, the practice does not seem to be popular nowadays. I do not remember to have heard of its being introduced as evidence in a murder trial, that the person killed was sick and would have died before long anyway. The laws of the country allow the taking of human life only after judicial proceedings, with every safeguard around those on trial. If one man kills another by accident, he may go to the penitentiary for it; yet surgical operations, almost certainly fatal, are continually undertaken in cases not specially urgent, and where the operators would be prosecuted, if the general public understood the circumstances.

Some of you may think that I am drawing on my imagination; that no surgeon would have so little regard for his reputation as to undertake a practically hopeless operation, but I assure you that I have known of more than one such, and others of you have, no doubt. I do

not propose to give myself away, nor any of my acquaintances here or in St. Louis, but will relate, for illustration, particulars of a case from a distance, in which the patient was not quite killed. An old lady had broken the lower end of the radius, and it had been poorly treated. Another surgeon, not an aspiring youngster, but one of the veterans, professor of surgery in one of the allopathic schools in the country, cut down upon, divided and readjusted the fragments of bone; but his confidently applied antiseptic dressing failed to work. Sloughing occurred, and amputation had to be resorted to. The antiseptic dressing again proved a disappointment. The stump finally healed but not until the health of the patient, previously good for a person of her age, had been so wrecked that she will probably never be well again. All this damage resulted from an attempt to straghten a crooked wrist in a patient seventy years old, which any fool ought to know better than to undertake, if he had not become daft on antiseptic dressings, that he fancied they could furnish vitality to the patient.

I do not wish to be understood to advocate timidity or hesitation in procedures however bold. I say do anything offering a chance of rescue from impending death, but I say, too, it is the duty of the profession at large to "sit down hard on" the fellows who are recklessly killing and maiming people who might otherwise live in fair health for months or years.

DEAR DOCTOR :—The case of Eczema Capitis I brought before the Society, you will remember, I gave two doses of Rhus. Tox., 4m; improvement began at once and her scalp is now entirely free of the eruption, and in place of the scabs, she has a fine coat of black hair nearly two inches long. How is that for *high*?

Yours Fraternally,

J. R. POLLOCK.

• • Practice • •

Malarial Diseases of the Eye.

BY JAS. A. CAMPBELL, M. D., ST. LOUIS, MO.
READ BEFORE THE SOUTHERN HOMEOPATHIC
MEDICAL ASSOCIATION AT MEMPHIS, NOVEMBER, 1889.

It is not my intention on the present occasion, to discuss, or attempt to explain the cause of, or offer treatment for, the ever present malaria, that hydra-headed monster which saps and weakens, depresses and torments vitality to almost the breaking point, but I desire to call attention to some of the various forms of eye troubles, which may be merely local manifestations of this aggravating complaint.

Some of the recent text books on the eye devote a few lines to this subject, but in many of them it is entirely ignored. From time to time attention has been called to it in current eye literature, where some peculiar and unusual complication, with a malarial origin, has been observed and recorded, but among the profession at large it is, as a rule, an unheard of topic:

My attention has been directed to this subject, with growing frequency of late years, and a large number of cases of severe eye trouble, of various forms, are fresh in my mind, which yielded only after the true nature of the aggravating cause was comprehended.

To me, among the most interesting of the malarial eye complications, is a form where small transparent blisters appear on the cornea, usually in a successive series. I have seen cases where there were but one or two of these small blebs, about the size of a pin's head, while in two cases I recall, the whole cornea was spotted with them. As a rule they are more abundant on the upper quadrant of the cornea. They are of uncertain dura-

tion, some lasting but a few hours, then breaking down forming painful superficial erosions, which soon close up. Again a series may last for several days before collapsing. They involve only the outer epithelial corneal layer.

I have likewise seen a number of cases of corneal ulceration associated with, and closely depending on, malaria. Attempts have been made to describe this form of ulceration as having a peculiar appearance and shape. I am convinced, however, that it has nothing distinctive which could characterize it differently from superficial branching ulceration of the cornea from other causes.

A number of cases of conjunctivitis have come under my observation, which were attended with regular periodic aggravations clearly malarial, and associated with general malaria; though in some cases the eye symptoms of the complication were by far the most prominent and pronounced.

Certain cases of periodic iritis have been traced to malarial causes; and periodic obstructions of vision, from vitreous murkiness, have been likewise explained.

In hot countries severe types of malarial fever have been followed by retinal hemorrhages. Relapsing fevers have occasionally been followed by inflammatory symptoms during convalescence, which is sometimes accompanied by iritis and vitreous opacities, followed by recovery.

Malaria is, at times, the cause of renal albuminuria; when this is the case, it may thus, indirectly, be the cause of a retinitis albuminurica.

Simple optic neuritis with defective sight, followed by recovery, with malaria as a cause, has been recorded. Attention has been properly called to the fact, that the loss of vision from malarial fever must not be confounded with blindness caused by quinine, given for its cure.

Lateral hemiopia, with mistakes in the

appreciation of color, lasting for a few days after a malarial attack has been described; as well as the loss of color sense to all colors but red, in another case.

Again, a case has been reported where the left eyelid became very oedematous, the eyeball of the same side extremely exophthalmic, and the conjunctiva intensely hyperaemic. All of this train of symptoms yielded rapidly to large doses of quinine.

Partial, and even total, temporary paralysis of the muscle of accommodation has been seen; and I have frequently observed apparent and bewildering astigmatic symptoms, from irritation of the nerve supply of the eyes, malarial in origin.

Temporary strabismus, from malarial influence, has also been described.

A most interesting case of eye trouble, from malarial cause, was recently under my care. Its peculiarity was that every second day, toward evening, a severe pain would suddenly seize the left eye; the lids would swell up, the conjunctiva was red and chemosed, and this was attended by profuse lachrymation. This would last for three or four hours, and then recede. There were very few, if any other malarial symptoms, aside from a sensation of heat and general flushing all through the body. The case made rapid and perfect recovery under *Chinium Arsenicosum*.

Other peculiar and unusual eye symptoms, connected with, and depending on malarial diseases, might be offered, but the above list is surely quite sufficient to illustrate the point I desire to make, which is this: that when an eye disease, whatever its nature may be, depends on a malarial cause, then it will only yield when the malarial disease itself is conquered, and it will yield to nothing else.

The importance then of a close discrimination and a thorough understanding of

the parts concerned, and the general causes which may influence and effect them, cannot be too highly magnified. It is this discriminating power, that makes one man a success, and the lack of it, another man a failure. The physician should be sufficiently versed in eye matters to know its relations to other parts and organs; and the specialist, who is not likewise able to read the signs aright, will be, and sometimes is, for this reason, a colossal failure.

Shot-Gun Medication.

On looking through medical journals one is startled at the rashness and apparent aimlessness with which some M. D.'s administer remedies. Many of the most noted formulas used by physicians in general are what are known as shot-gun prescriptions, i. e., containing a dozen or more ingredients, one of which is sure to hit the case. Of the effects upon the system of those which do not hit the case no account is taken; they are left to spend their force upon the economy as best they can whether to the advantage of the patient or not. Such prescriptions are Warburg's Tincture, Frehlig's Tonic, Gross' Neuralgic Pills, and other popular prescribed prescriptions. Before us lies a report of "A Case in Practice," (M. K. Sturdevant, M. D., in Med. Summary, August, 1889), in which a practitioner is vaunting his success, and he proudly details the following list of agents used to fetch his victim to time, all being taken concurrently.

Internally.

Calomel,
Pulv. Ipecac,
Pulv. Ginger,
Comp. Ext. Colocynth,
Cit. Iron and Quinia,
Sherry Wine,
Red Iodide Mercury,
Potassi Iodide,
Tr. Iodide,
Aqua Menthpip,
Chloral Hydrate,
Morphia Sulph.

Externally.

Tr. Iodine,
Tr. Opii,
Tr. Aconite,
Zinci Sulph,
Carbolic Acid,

Is it a wonder that Homeopathy is welcomed by so many people?—R. St. J. P., in *Indiana Pharmacist*.

Local Uterine Therapeutics.

BY WM. C. RICHARDSON, M. D., ST. LOUIS, MO.
READ BEFORE THE SOUTHERN HOMEOPATHIC
MEDICAL ASSOCIATION, AT MEMPHIS, NOVEMBER, 1889.

The question as to the necessity and advisability of local therapeutics has always been a vexed one to Homeopathic physicians, and has been the cause of much useless if not harmful, polemical discussion.

In the treatment of Uterine diseases the matter of local treatment has been discussed in text books, journals and societies until the question has become tiresome.

Our school of medicine embraces two classes of practitioners, one of which bitterly oppose anything in the way of uterine therapeutics, other than the properly selected constitutional simulum. On the other hand the class of specialists in gynaecology, which has grown up in the past twenty years, have come to depend largely on local measures.

The ultra constitutional and the ultra local therapeutists are both extremists, and while their opinions may be of value to us, yet we should follow neither, but learn to depend on the properly selected internal remedy, reinforced and assisted by mild, judicious local measures.

Before going into any special consideration of local uterine therapeutics, it may be of interest to briefly call attention to what the most eminent old school authorities have to say on the subject. Such men as Simpson, Thomas, Emmett and Hewit, after years of experience of the largest and most varied character, all finally conclude that the heroic use of caustics, curettes and intra uterine appliances of all kinds, whether medicinal or mechanical, are not only dangerous but rarely if ever useful.

In fact the best minds in the old school are to-day inclined to conservatism in the

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PER ANNUM.

use of local measures, and one of the latest and best books on the subject from an old school author, Dr. Davenport of Boston, has eliminated nearly everything but the mildest and safest measures, both in the way of instruments and medicines.

It is the object of this paper to call attention to the most desirable and requisite means of local treatment in uterine diseases where operative surgical measures are not indicated.

Displacement of the uterus are perhaps the most common disorder we are called on to treat and this brings us to a consideration of pessaries. It is safe to say that in most all cases of prolapsus, anteversions and antelexions of recent origin, that pessaries are not indicated and may prove harmful. In these cases rest and the indicated Homeopathic remedy will generally cure.

In cases of procidentia, retroflexion and retroversion, particularly if they have existed for any length of time, pessaries will not only be found useful but frequently absolutely necessary in order to effect a cure.

Without going into a detailed consideration of the natural support of the uterus let it suffice to say that one of the chief supports is the vagina. Anything that will destroy the tonicity of the vaginal walls will therefore have a tendency to aggravate uterine displacements.

With this fact in mind it behooves us to be careful in the selection of our pessaries to exclude everything in the shape of globe, bag or other varieties that would distend the vagina; the stem pessaries are, for most part, painful and cannot be worn with any degree of comfort and the only pessary that is free from objection is the hard rubber lever of Hodge with its various modification to suit special cases.

The intra uterine pessaries are so rarely indicated, and their use is fraught with so much danger that they should never

be used except by skillful specialists and even then with the utmost care.

It is not the purpose of this essay to point out the special indications for the use of pessaries or to go into the consideration of adjusting or removing them and as they are to be considered as nothing more than adjuncts, the same as splints to the surgeon, to be discontinued as soon as the parts have, by means of constitutional treatment, been restored to their normal condition, we will dismiss the subject.

In the treatment of uterine inflammation and its resultant pathological conditions in the shape of catarrhal affections, erosions and ulcerations, only the most bland and emollient local applications will be found of any real benefit.

The use of such powerful remedies as iodine, carbolic, chromic and nitric acids are reprehensible and the honest admissions of conscientious practitioners show that they are frequently dangerous, sometimes causing even death, and therefore they are being resorted to with much more care than formally, and will no doubt soon be entirely eliminated from the armamentarium of the gynecologist.

In the treatment of catarrhal conditions incident to the several varieties of metritis glyceroles of such remedies as Hamamelis, Hydrastis, Pinus canadensis, and Boracic acid will be found to render great service.

The method of applying glyceroles is by means of pledgets of absorbent cotton and should be done carefully with forceps, after the os, cervical canal and vagina have been cleansed of the decomposed mucus and other secretions. This cleansing may be done by tepid injections, and swabs of cotton, which may be supplemented and facilitated by Peroxide of Hydrogen, applied with a spraying instrument, after the secretions have been

wiped off and before the glycerole is applied.

Glyceroles are rendered more efficacious by the glycerine itself which is an agent of no small value in relieving congestion and inflammations of mucous structures.

Occasionally suppositories may be found useful and beneficial. They should be made of cocoa butter into which has been incorporated the desired remedy, and if desirable, they can be inserted with safety into the cervix, but never higher, and allowed to dissolve.

In the more chronic forms of inflammatory conditions of the uterus powders of Boracic acid or Hydrastis may be incorporated into absorbent cotton and inserted dry into the vagina against the uterus, with perhaps more benefit than the glyceroles.

Electricity in the hands of a careful manipulator, possessed of a good battery is a potent therapeutic agent in uterine diseases, and finally hot water, more particularly, in the acute stages of inflammation will be useful.

In conclusion I wish to enter my protest against intra uterine appliances both medicinal and mechanical.

There are unquestionably cases, now and then, in which it may be advisable to resort to intra uterine treatment, but the careless or frequent use of intra uterine injections, tents, pessaries, curettes and instruments is not only unsafe, but positively dangerous. Why uterine inflammations, catarrhs and other diseases should require more heroic treatment than similar diseases of mucous tissues elsewhere situated, is a question that advocates of cauteries, scrapings and cuttings will have a great deal of trouble to explain.

The conservative practitioner who depends on properly selected internal medicines, and those local remedies which are mild, non irritating and not destructive of any tissues, will certainly be the most successful in the treatment of uterine diseases.

The Scope of Cocaine in Orificial Surgery.

BY A. C. JONES, M. D., HOLDEN, MO. READ BEFORE THE SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION. AT MEMPHIS, NOVEMBER, 1889.

In examinations and for such minor orificial operations as are usually made in his office, the surgeon will find cocaine of great utility.

Urethral examinations may be made with little or no pain, by injecting from 30 to 60 minims of a four per cent. solution three to five minutes before beginning operation. I use for this purpose a hypodermic syringe with needle four inches long within a silver sheild the size of a No. 6 English sound.

A small hard rubber or glass syringe will serve the purpose equally well. Under cocaine anaesthesia I have frequently dilated the female urethra to the caliber of No. 23 English, removed carunculae, enlarged the meatus urinarius in the male, forcibly dilated strictures and performed circumcision in both children and adults.

In cystitis have frequently irrigated the bladder in both male and female patients. In catheterization after surgical operation or following complicated or tedious confinement where the urine must be drawn for some days spasm of the sphincter vesicae may be overcome or avoided and the patient relieved of much pain by applying to the meatus for two or three minutes a pledget of absorbent cotton saturated with the solution before making the urethral injection as already described.

In circumcision draw the prepuce well down and if the orifice will admit introduce a piece of absorbent cotton saturated with cocaine leaving it in situ three to five minutes.

Introduce the needle upon the mucous side near the fraenum, point directed laterally and slightly backwards, depositing

ten or twelve minims, then without removing, retract the needle the greater part of its length and carry to the opposite side and inject as before.

Withdraw the needle and introduce from the mucous surface opposite the fraenum near the line of incision, injecting again to either side. Make the incisions, divide the fraenum if too long in its attachment and then control the hemorrhage and relieve the pain from making the sutures by free application of cocaine on absorbent cotton.

If the prepuce is adherent and the orifice small, wrap the point of a probe with absorbent cotton, dip into the solution and with this break up the adhesions, draw the foreskin well forward and make the injections in a like manner but from the cutaneous surface.

Dr. H. W. Streeter, Rochester, N. Y., in a recently published article on "Dilating Urethrotomy" says: "The operation can be rendered absolutely painless by cocaine."

In patients suffering of vaginismus a vaginal or uterine examination may also be rendered painless by applying cocaine on absorbent cotton.

The writer was recently called to a patient far advanced in pregnancy, who was frenzied from pain and from fear of premature labor. She had suffered for several days of vulvo-vaginitis, the results of an ichorous leucorrhoeal discharge and of being nearly constantly on her feet over a cook stove in very hot weather. Only a few hours earlier she had received of her physician, carbolized vaseline which nearly crazed her when applied.

I called for hot water immediately but she had tried hot and cold water and they only made her worse. Applied cocaine on absorbent cotton and relieved her within five minutes.

Her only local treatment afterwards consisted in thoroughly dry the labia and

vaginal mucous membrane and dusting freely with bismuth subnitrate.

A redundant hymen or tags resulting from laceration of the vagina may be trimmed off with very little pain under cocaine.

In one case I removed five of these tags of vaginal mucous membrane, ranging in length from three-fourths to one and one-half inches, requiring two or three sutures each to coaptate the edges and control the hemorrhage, by injecting into the base of each ten minims of cocaine. Unless very thick at the base sub-mucous injection will not be required.

An irritable uterus may be sounded, dilated to a diameter of half an inch, curetted and flushed with hot water, boracic acid or other solutions with but slight pain by the free use of cocaine.

Apply first to the cervix on absorbent cotton and then by means of an applicator through the cervix to the fundus. A Sim's or Simpson's uterine sound answers this purpose admirably.

Wrap the cotton about the end of the sound before saturating and the slightly enlarged tip will prevent its slipping off and being deposited in the uterine cavity. After partial dilation a larger piece of absorbent cotton holding in absorption a greater quantity of the cocaine may be applied with the uterine dressing forceps, and repeated at intervals during the operation as indicated by the demands of the patient.

The operation of trachelorrhaphy, which I have a number of times performed without an anaesthetic, may be greatly facilitated by its use. Besides preventing very largely the pain incident to the dilatation of the cervix, freshening the surfaces, removing the cicatrix and the introduction of the sutures, it controls the hemorrhage to such an extent as to enable the operator to accomplish his work more carefully

and expeditiously and with greater ease.

I never introduce a rectal speculum, the patient not anaesthetized, without first inserting into the rectum, either by injection or absorbent cotton, a solution of cocaine. Five minutes after injecting one or two drachms, a bivalve or trivalve speculum may be introduced, dilated and rotated sufficiently to admit of a thorough exploration of the bowel.

Without sub-mucous injection pockets, papillae and even large pile tumors may be removed without great pain.

It has been my experience that patients complain less of the excision of hemorrhoids than of pockets, the latter frequently extending to the cutaneous margin which is more sensitive, more dense, of greater thickness and not so susceptible to the effects of the solution.

Sensation in a varicose hemorrhoidal vein is confined largely to its mucous covering and when this mucous covering is saturated with cocaine the pain incident to excising the tumor is less than that of puncturing it with a needle without the superficial use of cocaine.

I use a four per cent. solution exclusively—Parke-Davis—and have never been able to ascribe to it any ill effects.

Have used it freely in repairing injuries to the lips and face and yet had union by first intention and no more cicatrix than was entirely legitimate.

Dr. E. M. Hale. — Ϟactaeqaz.

As a member of the Bureau of Materia Medica and Therapeutics in the American Institute of Homeopathy, I have selected as the subject of my paper, "The Pathogenetic and Therapeutic Properties of the Cactaceae."

The number of known *genera* in this *family* is eighteen, and of *species*, about 800. I desire to include in my paper all medical information concerning any species. I urgently solicit physicians of any country to send me all observations relating to the toxic and curative powers of any member of this important family before June 1st, 1890. E. M. HALE, M. D.

Chicago, Ill., 65 22d St.

Pharmacy.

BY J. C. WISE, PH. G., OF KANSAS CITY, MO.,
READ BEFORE THE KANSAS STATE HOMEO-
PATHIC MEDICAL SOCIETY, EMPORIA, KANS.
MAY 2D, 1889.

Pharmacy as a branch of the art of healing, no doubt deserves considerable more attention than is generally devoted to the same. Every one interested should be well acquainted with the pharmacy work in our school. To prove this, a slight but brief comparison will show forcibly how true. An Allopath M. D. looks to classification; he classifies diseases, the names of such a disease stand for a certain row of symptoms and the medicines administered are also divided into general classes. That school speaks of stimulants, astringents, tonics, etc., which are subdivided into arterial stimulants, cerebro-nervo stimulants and anti-spasmodics. They have sedatives, caustics, cathartics, diuretics, etc.. Studying the principles of the old school, they note the symptoms as classified only, disregarding all the peculiarities. It is true a remedy according to their *Materia Medica*, may have several of the properties just mentioned, yet according to such knowledge and means, their remedies are classified. The specific difference in their eyes between the different stringents or purgatives is simply one of more or less violence, of vehemence or mildness; therefore an Allopathic M. D. prescribes his medicine or compound, and this medicine has the desired effect as a caustic, purgative, diuretic, or as the case may be he has reason to be perfectly satisfied. Aloes, rhubarb, magnesia and other salts are cathartics and if they possess this property in the desired degree the action thereof is entirely satisfactory. If then the one quality of a plant is preserved after being dried, baked, decocted or distilled, it answers perfectly and satisfactorily in every respect for the purpose in

view ; yes, even substitutes may be used as long as they come under the head of the particular class,—so far the Allopath.

The Homeopathic School, which has obtained this knowledge by careful, minute observations, and by provings upon healthy persons, is of an altogether different character. The grand principle of the Homeopathic *Materia Medica* is the knowledge of the curative action of our remedies based on the provings on the healthy, which provings are carried out into details and minuties ; again these provings were obtained by certain bodies prepared in a certain way, and if we wish to obtain these symptoms in their genuineness we must employ the same substance in the same way ; therefore our aim in the Homeopathic Pharmacy must be to obtain the original substance from which we obtained those symptoms with all those particulars as stand noted in our *Materia Medica*. Too much stress cannot be laid upon this fact and it would be really better to forget how to make a preparation and do without it than to make it wrong ; thus, while in our way of preparing the green plant tinctures we preserve, with all their healing qualities, the active powers desired by the Allopath ; they are therefore very much favored by that school, but it is impossible to use their preparations homeopathically, their minute actions (if they are possessed of any) not being known. The question is variously asked, why is the *Belladonna*, *Aconite*, etc., to be imported, should not our domestic plant be of the same virtue ? The answer is, that our provings are based upon remedies made of plants which have grown in a certain country, in a certain locality, preserved at certain seasons ; that the different countries can produce similar plants of one family, yet hardly related in their properties, is so well known to every person that it seems unnecessary to quote any

example. Look, for instance, at a grape grown in Vermont, and one grown in Ohio, and one grown in California ; take a potato grown in New Jersey, Colorado, Utah or California, and the sense of taste alone shows us the immense difference. As to medicines, it is a well known fact that for instance the American *Pulsatilla*, is almost inert in action compared with the plant grown in Germany. The question as to what effect could the drying process have, allow me to call attention to the *Rhus Toxicodendron* which in its green state can scarcely be approached without unpleasant effect ; while we may safely rest upon the dry herb, yet the main question in view again, is admitting their poisonous, destructive powers, of having been preserved, how can we use them homeopathically without having their provings in a dry state.

That some of the medicinal agents do escape during the process of drying herbs (of which dried herbs fluid extracts only are made), is a well established fact ; for instance, a *Belladonna* leaf while undergoing that process will expel small crystals disappearing and coming until all juicy substances have left the leaf. Science has not been able so far to determine the nature of these crystals and they may be but a common gum ; they may be but *Amonia* or one of the family ; they should be and must be embodied in that tincture which we call the Homeopathic tincture of *Atropia*, for the simple reason that these crystals were embodied in that preparation from which we obtained our proofs. I am dwelling upon these points because the market is full of preparations foreign to all Homeopathic principles and introduced by concerns and parties who love Homeopathy as "the devil does holy water." The Homeopathic M. D. can positively not afford after the long and toilsome study to use preparations which are altogether opposite and foreign to his

method and science. Ladies and gentlemen, let me quote from Prof. Boericke, comparing a doctor with a gunner. He says: "he may be an excellent marksman without ever having made powder, or constructed a rifle, but it is essential to him to know the qualities of a good rifle, or those of powder and perfect cartridge, or else he will have but poor success in spite of his skill; therefore just as important as is for the marksman proper ammunition, just so important it is for the M. D., and in fact a thousand times, he must have perfect Homeopathic medicines, or else he may miss fire at the most critical moment, and simply for the want of a properly prepared medicine may lose his patient and his reputation in the bargain. If the time and place permitted it would be a pleasure to me to call attention to many a form of the preparing of certain medicines now in the market, but I must desist. Yet I must call your attention to the so-called *steam* made triturations. Progressive myself and progressive as our science is, we should watch with jealous eyes any and every way, system or method deviating from the formulas and laws as laid down by Samuel Hahnemann. That great man foreseeing the natural desire to make easy the preparation of triturations, and as a great chemist and well acquainted with the consequences following the rapid movements of pestle and mortar upon sugar of milk triturated which more or less must char and thus produce chemical changes not wanted, he laid down very plain and unmistakable rules for the art of triturating. I would also caution you in the use of these so called trituration tablets. Those compressed by actual force only, are of course an advance and all right, but those tablets made by an addition of water and the white of an egg or mucilage, thus turned into a paste upon glass or rubber plates and baked and

dried, it seems to me are very little promising for Homeopathic purposes. Ladies and gentlemen, imagine Homeopathic triturations of iron, copper, salts or other chargeable materials mixed with water and albumen, dried and baked. The fact that here and there satisfactory results have been obtained signifies nothing. "A blind chicken sometimes finds a worm." The closer we become acquainted and embodied with our *Materia Medica*, the closer we must hang on to the original art of preparing—keeping close together the principles of proving and preparing. It is a pity that Dr. Breivagel in his address as president of the Homeopathic Institute in 1882, in which he expressed a desire that Bureaux of Pharmacies should be established has not been given more attention, as he says another strong argument in favor of investigation is contained in the fact that the absence of a uniform standard in the preparation of drug attenuations has afforded the opportunity for the surreptitious introduction of methods that were never dreamed of by Hahnemann, and that should have no place in scientific Homeopathy.

In its struggles for scientific recognition and peace, it can ill afford to be handicapped by bottle washings and other absurd vagaries, nor can we hope to answer satisfactorily the questions of honest inquirers, if we are unable to give scientific reasons for the belief that is in us. Another question as to which is the best, the imported or domestic tinctures is also answered by what has been said before, the best. *No*, the *only* Homeopathic preparation is the one described. Very often a tincture is adjusted by the practitioner according to light or dark color. This is wrong. However, the green plant tincture is generally lighter in color, becoming darker with age; also fault is found with tinctures showing precipitation; this is also wrong because the alco-

hol, unable to hold certain gum substances, which according to the law of nature must sink, this is unavoidable ; of course the tincture having stood long enough, carefully poured out, will have little of it. Keeping the bottle well corked, preventing the air from entering will add largely to its preservation. There are a good many disputes as to the color of bottles to be used ; it appears that the white glass, keeping the same in a protected place, is the best. Of course some remedies very susceptible to light must be kept in the dark bottles. A medicine should be kept away from the furnace, fireplace or the stove, and it is recommended that the same be covered with pasteboard thimbles so that no dirt may settle upon and around the cork. Following the demand for something new, as well as true to our principle of progress, the Homeopathic Pharmacy have put upon the market a great many preparations for external use, particularly the aqueous or N. A. decoctions. There are also a great many nostrums for internal use ; but as this is not an advertising medium I must beg to be excused from naming them ; but I do believe that a good many of them based upon Homeopathic principles give good satisfaction and enjoy large sales, thereby converting many to Homeopathy.

To conclude, allow me to report upon the success which Dr. Schuesseer's Bio-Chemical treatment has achieved. The single reports as well as the enormous demand for the remedies is astonishing. The greatest results seem to have been achieved from the 3x and the 6x, a great many practitioners using both attenuations according to the case of sickness.

SOUTHERN JOURNAL OF HOMEOPATHY,
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Homeopathy in Georgia.

BY F. H. ORME, M. D. READ BEFORE THE
SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION,
AT MEMPHIS, NOVEMBER, 1889

For the first time in many years a session of the Georgia legislature has adjourned without having attempted any interference with the existing laws with regard to the practice of medicine.

This is doubtless due to the fact that the present laws concerning medical practice are more nearly satisfactory to the profession and to the public in general, than any that would probably be adopted if changes should be made.

We have a *registration law*, fair alike to all, the holder of a diploma from any duly chartered college, after registering under oath as a graduate, being allowed to practice.

The old boards of examiners were abolished several years ago, after long trial, and are not likely to be re-established, as the discussion on the subject before the legislature, at the time of the change, disclosed the fact that they had been inefficient and iniquitous, mercenary and unscrupulous. It is at least feared that examining boards in some other states are of like character, and there has been a growing opposition to boards for some years. So much is this the case that the Southern Homeopathic Medical Association, in 1885 adopted resolutions expressive of its disapproval of boards, and favoring a registration law, at least for the southern states, the idea being that our best hope resides, at least with our college faculties, which should be held up to as good a standard as possible, and which are certainly the more competent examiners. True it is that they pass upon their own work ; but, when the attempt is made to overcome this objection by boards, greater evils are encountered.

In many of the southern states, there

are no state or local societies of Homeopaths, and the establishments of boards of this school would be impossible. If established in other states they might soon dissolve.

Complaints are made in some of the southern states that there are boards of examiners, all of one school, which, whatever may be their arrangement for appearing, or even intending to be fair, are, from the nature of things, intimidating to applicants of other schools. The result is, as a matter of course, that few of our school enter those states.

The American Medical Association, some years ago adopted a plan for having boards of the same character in each of the states, the object being to control the licensing; but it is believed that not much headway has been made in this direction.

Still it behooves all Homeopaths to be vigilant and active in counteracting such efforts. Whatever medical laws may be enacted, they must be adapted to the needs of several states, as what may meet the requirements of one state may be unsuitable for another.

If boards of mixed character were established, with every appearance of fairness in their organization at the start, it would probably not be long, in most cases, before affairs would be so conducted that the members of the minority schools would retire in disgust, and matters would be in the hands of the majority, as has generally happened.

If full boards for each school of practice were established, there would doubtless be much contention and wrangling, with the intensification of sectarian feeling. Boards, therefore, are not necessary, and at least in most of the states are objectionable, especially as legislation affecting them is likely to be constantly attempted; while the registration law, which is intimidating to no one who has a genuine diploma from a chartered college in any state, and which does not attempt to establish an orthodoxy, would doubtless be more stable, and thus do away with continual efforts to disturb the existing laws upon the subject.

Insanity and Some Causes Leading To It, and The Duty of The Physician Regarding Their Removal.

BY E. R. MCINTYRE, M. D., TOPEKA, KANSAS.
READ BEFORE THE KANSAS STATE HOMEOPATHIC MEDICAL SOCIETY, AT EMPORIA,
KANSAS, MAY 2, 1889.

To define insanity is no easy task. To locate a dividing line, and say that on this side we are fully accountable for our every act, while if we reach the other side, we lose all accountability, is perhaps not practical. A man may be perfectly sane on every subject save one alone, and yet be insane on that one. This may and probably does lead to almost any crime, or simply make the victim a bore to all with whom he comes in contact. Many convicts should be sent to the asylum instead of prison. Hence, we will not attempt a definition of insanity.

Theories have governed the world for all ages, even in its most practical relations. "For long ages," we learn, "religious and philosophic hypotheses determined the civil and social status of the insane, and the whole manner in which they were to be dealt with as well as the means to be taken for their cure."

The first recorded case of insanity was 1063 years before Christ, when we are told that "Saul, possessed by an evil spirit, was solaced by the music of David's harp and became well again." Again 569 years before Christ, Nebuchadnezzar, King of Babylon, "was driven from men, and did eat grass as oxen, and his body was wet with dew of Heaven, till his hairs were grown like eagles feathers, and his nails like bird's claws," and at the end of six years he recovered and was reestablished upon his throne.

In ancient Egypt, cases of mental derangement were sent to the temples to be cured by the priests, and they were regarded as afflicted by the gods or possessed of demons. Insanity was generally

attributed to divine inspiration or diabolical possession, until the time of Hippocrates, who first taught that the brain is the organ of the mind, and subject to physical laws and diseases like other organs, and that insanity follows abnormal conditions of this organ.

But it is not our design, even had we the time or space, to write a history of insanity, except what may seem necessary in the discussion of the relative frequency of this trouble now, as compared with the past. Neither do we wish to enter a discussion of all the book classification or their value if any.

All human beings may be regarded as tending toward one or the other extreme of intelligence, and as marking in their own generation, one grade in bodily and mental rise and decline of the family to which they belong, as well as illustrating the normal course of all mental life. The student in mental pathology is impressed with the fact that thorough research is constantly increasing the cases in which the seeds of insanity are sown early in life.

Nature moves with majestic slowness in keeping with the wonder to be performed, and she, always takes several years to complete a fully grown man or woman out of a boy or girl.

There were nearly fifteen hundred suicides in this country during the year 1888 and of these many moved in what we call good society, there being fifteen bankers, five editors, eleven physicians, and eight editors. From this we learn that this one mania, at least is not confined to any one class, condition or profession in life. It is found in all ages, conditions and sexes. From the young boy who shot himself in North Topeka because he was scolded or the young lady student of Oberlin College, who shot herself because of overstudy, to the old man or woman whose earthly career is nearly ended. We

rarely pick up a paper without reading of someone who has cut short his own existence. Our insane asylums are full. How often we hear the story of this man or that woman losing his or her reason. These things lead to the inquiry, why is this? How shall we remedy it?

The brain as the highest organ, has intimate relations with every organ and tissue of the body. All prevailing and fundamental moods of feeling spring from this deep source of organic sympathies. Hence, we are to look for the cause of so much insanity to such agencies as are capable of producing an abnormal condition of the brain, directly or reflexly.

Among the most important causes we may name, heredity, maternity, different pathological conditions acting directly or reflexly on the brain, worry in the effort to get money, educational systems, neuroses, traumatism, alcohol and tobacco.

"It has been our observation," says the *Scientific American*, "that beer drinking in this country produces the lowest kind of inebriety, closely allied to criminal insanity. The most dangerous class of ruffians in our large cities are beer drinkers."

Alcoholic excesses may immediately excite an attack of acute mania or predispose to insanity that may be directly occasioned by traumatism or powerful emotion; or acting still more remotely; it may cause congenital mental disorders in the offspring of drunken parents or bringing loss of honor, social position or fortune, it may through psychical channels lead to suicide or insanity, or both. So early as the moment of conception the coming man receives the impetus toward genius or imbecility. The popular belief has become an admitted fact of science, that parents may beget idiots in moments of intoxication, solely through alcoholic influence.

In the learned professions, lawyers are more liable to insanity than physicians, and the latter more than ministers. Maternity occupies a very important position among the causes, fifteen per cent. of all cases among women occurring during the discharge of the functions of pregnancy, parturition or lactation. I must not omit abortion, with its attendant hemorrhage and other conditions in this connection.

It is unnecessary to speak further of traumatism or reflex action as causes leading to insanity.

American hurry and worry is one of the important factors as cause of insanity.

By many, masturbation is considered an important cause, but I believe it to be a result or symptom of some abnormal condition of the nerves, either central or peripheral. This vice though practiced by many animals and by a large portion of the human race at some time of life, is still held so justly in disgust that *moral* contrariety and changes of character follow its continued practice. So may mental disorders be excited by a revulsive shock, due to the interruption of a lifelong habit of sexual constraint. The forces of the higher cortical centers, long accustomed to move in certain directions for the complete inhibition of all sexual feelings cannot be suddenly arrested without painful commotions. Hence we see a reason for past-connubial insanity. Local diseases of the female genital organs may so act on the mind as to cause it to lose its balance. Local diseases of the male genitals have not this psycical importance.

It must be remembered that most insanity is the result of a long series of causes, composed of not one, but of all the physical and mental shocks to which man is exposed. All baneful influences of life conspire to accomplish the final result.

If one is possessed of health and a sound physical and mental heritage, no one cause, unless it be actual loss of cortical centers can produce insanity. Any great strain of the system is manifested in the feeblest organ first, and if the brain gives first evidence of failure, it is because of some inherent weakness.

The time will come when the same thorough study that has given such clear accounts of clubbed hands and feet, of amputations of limbs and of other deformities of hard and soft tissues during intrauterine life will extend to all pathological changes of nervous tissues and arrests or perversions in development occurring in utero and forming the organic basis of idiocy, imbecility and certain forms of hereditary insanity. It is a general law of biology that like produces like. Not only are general and constitutional likenesses, but also specific and organic weaknesses transmitted.

In one family, heart disease, in another some one form of neurosis or some mental disorder appears in successive generations.

We have abundant evidence to prove insanity as clearly transmissible as epilepsy or other neurosis, and it has often been observed that an exact type of mental disease has repeated itself in the offspring. An insane perversion of the instinct of self-preservation, taking a particular form of suicide has been known to occur in four generations. In the first generation we may trace neuralgia, chorea or hysteria; in the second epilepsy; in the third insanity and in the fourth, idiocy or almost any other order of these occurrences may be observed.

Rapid degeneration, either mental or physical, or both, is often observed in cases of intermarriage of blood relatives for several successive generations, for different reasons.

Again there is a type known as atavism

in which the child inherits insanity from its grand-parents, its parents showing no abnormal mental symptoms. The transmission is more apt to be confined to the same sex, as from mother to daughter, father to son.

We find authors differ as to the per cent. of insanity that may be attributed to inheritance, this difference ranging from twenty-five to seventy-five.

The neuroses most nearly allied to insanity may be transformed into one another during hereditary transmission, may be severally conveyed to different children of the same parents, or may co-exist or follow each other in the same patient. The neurosis having the most constant relation to insanity is epilepsy fifty per cent. of epileptics suffering at some time of life, from the impairment of the mental functions. There is gradual deterioration of the mental and moral nature that may be considered the common basis upon which are developed more active symptoms of psychical disorder.

It has been said that fifteen thousand lunatics confined in American asylums owe their condition to tobacco. While the excessive use of this poison is doubtless an important factor in the production of insanity and many other neuroses, I am not prepared to accept this statement without certain qualifications.

As already stated, insanity is not due to a single, but to several causes. Tobacco may often be considered as one of the causes.

But whatever pathology may have caused the epilepsy, whatever discharges from the cerebral cortex, the central ganglia or the medulla, whether spasm or paresis of the vessels, and whatever the *indirect* cause may have been, whether insulation, traumatism, tumors or other structural brain lesions, deep molecular changes in the cerebral cortex have taken

place whenever insanity is permanently established.

I have given most space to those factors in the cause of insanity, which seem to me to be of most importance to the general practitioner, viz: Alcohol and hereditary, the one often depending on the other. I have also briefly alluded to maternity and abortion with its surrounding conditions, whether induced or otherwise. And when we contemplate the awful consequences that may follow the criminal induction of abortion, we are struck dumb with amazement that any physician is willing to take the responsibility for a few paltry dollars, yet we learn of numbers of them in every city. Americans are noted for the hurry and worry with which they jostle each other in the attempt to get money. I have already referred to this as a cause of insanity. What a rare thing it is to see an individual, man, woman or child, who is not in a hurry. They labor night and day under a continued physical and mental strain in their incessant rush to accumulate riches, without recreation until in many cases, tired nature rebels. It then is whipped into further effort, in many cases by some form of alcoholic stimulant. I blush to say, often prescribed by the family physician, until paralysis or insanity cuts short the usefulness of the victim.

I feel to thank the Lord there are but few in our ranks as a school who can think of nothing else to prescribe and hence, (as many do in the old school,) give whiskey for everything and everybody. Do they stop to consider the possible results of their work or the responsibility they take?

What is our duty as physicians in the face of the above facts and conditions. It would seem a plain road, viz: Discourage *all* things tending in any way, di-

rectly or indirectly, to weaken the present generation.

Encourage temperance, morality and moderation in the parents that they may bring forth healthy offspring. A stream never can rise above the fountain.

I may here refer briefly to the modern idea of raising children. A boy is permitted to enjoy those exercises necessary for his physical development, while the girls are dressed up like overgrown dolls, and never permitted to romp or play. It is not lady-like. Nature knows no sex and until this error is remedied we may expect even the present small per cent. of women who are capable of bearing healthy children, and none other are fit to enter marriage relation, to still continue to decrease.

I wish before I close to acknowledge my indebtedness to the labors of Dr. Theodore H. Kellogg, for many valuable suggestions.

According to Dr. Leuf, when water is taken into the full or partly full stomach, it does not mingle with the food, as we are taught, but passes along quickly between the food and lesser curvative toward the pylorus, through which it passes into the intestines. The secretion of mucus by the lining membrane is constant, and during the night a considerable amount accumulates in the stomach; some of its liquid portion is absorbed, and that which remains is thick and tenacious. If food is taken into the stomach when in this condition it becomes coated with this mucus, and the secretion of the gastric juice and its action are delayed. These facts show the value of a goblet of water before breakfast. This washes out the tenacious mucus, and stimulates the gastric glands to secretion. In old and feeble persons water should not be taken cold, but it may be with great advantage taken warm or hot. This removal of the accumulated mucus from the stomach is probably one of the reasons why taking soup at the beginning of the meal has been found so beneficial. —*Indiana Pharmacist.*

Some Suggestions on the Therapeutics of Fevers.

READ BEFORE THE SOUTHERN HOMEOPATHIC ASSOCIATION, AT MEMPHIS, NOVEMBER, '89.

What a magnificent array of febrile and anti-pyretics we have accumulated!

How surely will blood-letting reduce the pulse, lessen animal heat, relieve pain, and quiet the nervous system!

Will not digitalis control the circulation and reduce a pulse of 120 pulsations to 80, or even 60 or less?

Will not Hydrate of Chloral reduce the highest temperature from 20 to 50 in a few hours?

Will not anti-febrine, anti-pyrine, thal-line, exalzone, pyrodine, phenacetine and ever so many more new preparations do the same?

Will not aconite, in drop doses repeated every fifteen minutes, as recommended by Ringer, ligusify a fever into a cold sweat in a very short time?

Will not Jaborandi always produce free perspiration?

Will not the cold bath frequently repeated, or the ice water spray relentlessly applied, subdue the most intense febrile conditions and restore the patient to health?

Is not Quinine an immense anti-pyretic, and will not ten or twenty grains given every few hours break up and abort yellow fever, typhoid fever, pneumonia, or any other febrile condition?

Then what rich anti-pyretic resources have we in the germicides and microbe killers! If our fevers are produced by germs and their progressive development, how easy it is to annihilate them in a day by saturating our patients with carbolic acid or bi-chloride of mercury?

If to cure a fever we have only to reduce the pulse and lessen the temperature why should any fever last more than a few hours?

Because the enthusiastic theories of cure by the reduction of heat are invalidated by the constantly repeated facts which are presented to our consideration. The fever is merely *suppressed*, and the result is generally about as bad as when an eruptive disease is "driven in" by some injudicious external treatment.

In the epidemic yellow fever of 1878, many patients were subjected to the cold bath and the ice water spray treatment. The pulse was kept down to 72 and the temperature to 98°, but the disease went steadily on and produced death a little earlier than usual. Why should we suppose that a mere reduction of pulse and diminution of heat by anti-pyrene, anti-febrine, or any other anti-pyretic, could produce any better results? What can we reasonably expect from any of them in large doses but prostration of the system, endangering collapse, and followed by an earlier death, or a more retarded convalescence?

Dr. Fothergill, a very high authority, after saying that his antipyretic mixture reduced the temperature of a post-partum fever from 105° to 101° in twenty-four hours and held it there, proceeds naively to observe, "notwithstanding which the disease went steadily on to a fatal issue."

While one set of experimenters advocates the use of anti-septics and germicides in fever, another set has discovered that bacteria, in the human system at least, cannot survive a temperature of 105°. Therefore we may conclude that fever is a reactive effort of nature to burn out the bacteria, bacilli, microbes, etc., and that our anti-pyretics, instead of doing good, really avert the beneficent process, instituted for the cure!

The fact is, that our pathologists have attributed an exaggerated importance to high temperature. Animals have lived three weeks with an average rectal temperature of 107° and the human system

has often endured that elevated range without injury. It seldom produces the fatty degeneration and retrograde tissue metamorphosed charged to it. They are the result of other coincident causes. It is folly to see nothing in fever but high temperature, and to seize rashly upon every means suggested in order to reduce it.

Great expectations have been raised as to the anti-pyretic, anti-septic and cold water treatment of fever. The evidence up to this point has been unsatisfactory and often contradictory. What has succeeded magnificently with one physician has failed with another. We have had no thoroughly scientific reports of cases in which one remedy was given, and no other remedy or measure employed, so as to confuse or modify or invalidate the inferences. The new remedies have doubtless proved of great benefit, but their exact value or action has not yet been ascertained, and their beneficent effects may depend upon some other specific property than the power to lower the animal heat.

Notwithstanding all the new remedies and measures introduced of late by the Allopathic school, I am convinced that the Homeopathic treatment of fever, imperfect as it is, is still the best.

WHY DO I CALL IT IMPERFECT?

The Homeopathic selection of a remedy is based upon a comparative study of two two parallel series of phenomena, the natural history of the disease under treatment and the pathogenetic power of drugs to produce a grouping of similar phenomena.

Fever is a complex state, of which the principal factors are, elevated temperature, increased circulation and respiration, diminished secretion and painful nervous erethism. It has three typical stages, cold, hot and sweating; one or even two of which may be latent or suppressed, but

the pathological condition is one and the same.

The innumerable symptoms which accompany fever, and differentiate one case from another, may or may not belong to the true febrile condition. It is therefore exceedingly difficult to cover, as we say, any given case of fever with a true Homeopathic simillimum, from which we may expect prompt curative action.

We have hundreds of remedies and they all produce fever, first or last. But it is singular that almost all of our drug-fevers are secondary fevers, the effects of inflammations or other organic troubles produced by the drug. The fever of arsenic is a reflex fever from the irritated state of the nervous membrane; the fever of bryonia is a reflex fever from the irritated state of both nervous and serous membranes; the fever of phosphorus is a secondary fever from congestion of the lungs, &c. No remedy producing some hard lesion first, and a secondary fever afterwards can be a Homeopathic remedy for the general state we call idiopathic fever.

When we picture to ourselves clearly the febrile condition free from organic complications, the relation of the symptoms to each other and the order of their development, and turn to the Homeopathic Materia Medica, we find a genuine simillimum for our case. We are astonished and pained at the poverty of our resources. When we have counted aconite, belladonna, bryonia, gelsemium and veratrum viride, on the fingers of one hand, and started on the other hand reluctantly with rhus tox and baptisia. What fever remedies shall we assign to the remaining three fingers? Even from those named and universally employed in fevers by our ten thousand practitioners, how seldom can we select ONE which will precisely cover the symptoms of the case

in hand, according to all the requirements of the Homeopathic law.

We now see why I say that the Homeopathic treatment of fever is imperfect.

I have spoken ironically of the enthusiastical expectations which have been raised in regard to the solely anti-pyretic treatment of fever. The obliteration of a single prominent symptom does not cure the disease. On the other hand, I would warn the Homeopathic physician not to trust exclusively in fever to what he regards as a simillimum to the case. Fever is a very complicated affair, and no single remedy or even two remedies alternated can truly meet all its conditions. Bring in the aid of suitable adjuncts. The secretions are generally lessened in fever; overcome the constipation by gentle purgatives; a hot foot bath, repeated if necessary, will quiet the nervous system and bring on perspiration. Remove the accumulated caloric by frequent tepid spongings. Five grains of anti-febrine or anti-pyrine will relieve the accompanying headache in a great measure. The intense nervousness sometimes present, if not removed by coffee or Homeopathic specifics, will yield to a moderate dose of bromidia. Prolonged insomnia may be conquered by ten grains of Sulphonal.

This gentle and conservative management of fever is far better than to endeavor to abort or to annihilate it by immense doses and violent measures. And even when we have done our best, let us remember that nature has done more than we have, and that the result might have been the same or even better, had we done nothing at all.

Remove the cause and the effect ceases, If we knew the real causes of fever, and the modes of their operation, we might be more aggressive and successful in its treatment, but we have nothing but theories, speculations and approximations to

trust. We have one great fact, however, of which there can be no doubt. However quinine may act, however powerless it may be as an anti-pyretic in the height of fever, it is the only reliable antidote yet discovered to the cause or causes of intermitting and remitting fever. In that respect its value is inestimable. Without it, the white race could scarcely live in the paludal districts of America. It was through his experiments with Peruvian bark that Hahnemann discovered the Homeopathic law. Let his disciples give due credit to quinine in large doses or small.

WM. H. HOLCOMBE, M. D.
New Orleans, La.

The Medical Counselor makes a center stroke in the following:

Josh Billings once said in substance (we are unable to quote his exact words and orthography): "When a man comes to me for an opinion, I first find out what sort of an opinion he wants; then I give it to him. This makes him think that he and I are the two greatest people living." Any physician at all acquainted with the previous utterances of the *Times* and its attacks on organized Homeopathy, cannot but suspect, on reading the answer of the eminent jurist, that it is much like many other legal opinions, it is furnished by a gentleman who knows what is wanted and what he is being paid for.

Truth and Poetry Combined.

I extracted the wrong tooth, but there's no harm done ;
I like to tell the truth, when there's no harm done.
The patient never knew if I pulled one tooth or two ;
And he still has got a few, so there's no harm done.

I once made a patient lame, but there's no harm done.
And he'll never be the same, but there's no harm done.
He thinks it was his fate, that he took advice too late,
For a train he's often late, but there's no harm done.

I put out a patient's eye, but there's no harm done ;
He thinks it was the fly, so there's no harm done.
In place of Atropin I dropped in Winter Green,
But, of course it wasn't seen, so there's no harm done.

Once I gave too big a dose, but there's no harm done ;
I request you'll keep it close, but there's no harm done,
Up the medicine he threw, or shouldn't I look blue,
What I tell you is quite true, and there's no harm done.
—*Medical Record.*

The Mechanical Treatment of Uterine Displacements.

BY LUCY WAITE, M. D., CHICAGO, READ BEFORE
THE SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION, AT MEMPHIS, NOVEMBER, 1889.

The whole range of gynecology presents to us no more puzzling problem than that of the treatment of chronic displacements of the uterus. No case can establish a law for another, and each in turn must be decided upon its merits. So much depends upon the general condition of the patient, upon the elasticity and tonicity of the parts, that each case presents itself as a puzzle. Few patients are willing to undergo operative treatment until other means have been tried, and, indeed, it is the policy of good conservative treatment, to give other measures a thorough trial, as the most experienced may be deceived as to the responsiveness of the parts to a milder form of treatment. The vexed question of pessaries presents itself as the first to be solved in considering the subject of mechanical treatment. Some authors class pessaries among the instruments of torture, while others tell us that a physician who never uses pessaries will simply have to give over half his patients to one who does. Pessaries are, alas. too often instruments of torture, but they are often, too, a great aid in the treatment of difficult cases. Because pessaries have been inserted by ignorant physicians upside down and allowed to remain six years, as in a case which came recently under our notice, and because all manner of evils follow in the train of such practice, it proves nothing in regard to the proper use of pessaries as accessories in the course of the treatment. Any physician who will insert a pessary and call a case cured, knows nothing of either anatomy or pessaries.

If all the conditions surrounding the patient during treatment are perfect, pes-

saries are generally superfluous ; the same object can be obtained by the tampon if properly made, and is much to be preferred. But if the patient is obliged to be upon her feet much of the time, and treatment must be given at the office, the pessary is truly a blessing, both to the physician and patient. Graily Hewitt's rules for the use of the pessary must however, never be overstepped ; he says: "It must hold the womb in normal position ; it must not produce the least feeling of discomfort or pain ; it must be made of some malleable material, and must not be too large or too small, too long or too short, too wide or too narrow, too curved or too straight." Where we can have our patients under our immediate care, or can surround them at their own homes with all the conditions favorable to the treatment of uterine displacements, tampons have a wide field of usefulness, and our patients can be cured in half the time or less, than it takes where we are obliged to treat them under the most adverse conditions.

Tampons of antiseptic wool, covered with a thin layer of absorbent cotton, answer every purpose better than those made wholly of either. The wool keeps the proper shape and stays in proper position much better than cotton, and the layer of cotton allows of medication, and does away with the objection made to wool on account of its non absorbent qualities. In the treatment of retroflexions and versions the position is all important. Nearly all our best writers on gynecology advise the knee-chest position in replacing the retro-verted or flexed uterus, but they do not make it emphatic enough. It is not only advisable but absolutely necessary to a painless and speedy cure. With the patient on the back we have all the conditions for the replacement of the organ unfavorable ; the weight of the intestines must be

overcome, and we are working entirely without the aid of that best of repositors, atmospheric pressure. With the patient in the knee-chest position, and the vaginal opening expanded by the fingers, the uterus will sometimes be returned to normal position by the pressure of the in-rushing air alone. Where this is not successful, the two fingers, if long, as they should be, will seldom fail to replace the retro-verted uterus if there are no adhesions present. If instruments must be used, the conditions are certainly far more favorable in this position than with the patient upon the back, or even in the Sims position. The proper insertion of tampons and fitting of pessaries we consider this position quite as necessary, and it reduces the discomfort to the patient to the minimum. The whole question of dilatation of the cervix, in regard to its evil effects, seems to us to depend entirely on the manner of operating. Forcible dilatation under any anaesthetic, or in other words, where the physician and patient are blind, cannot fail to be followed by disastrous results ; the same applies to dilatation by tents, where the tents are inserted and left to dilate at leisure. The slow dilatation by means of the graduated uterine sound is not open to the objections made against either of the other methods.

With the patient in the knee-chest position, and by careful and delicate manipulation, dilatation may be performed with very little discomfort to the patient and with absolutely no danger of setting up inflammation. If the parts are very sensitive, and there is much congestion, preparatory treatment for several days before each dilatation, by hot carbolic douches will put the parts in better condition and make the operation less painful. The degree of dilatation at each treatment will depend upon the sensibility of the uterus. The operator must feel his way very care-

fully and lead up gradually to complete dilatation. Once a week is often enough to dilate in ordinary cases, and should never be done at the office, as complete rest for several hours afterwards is absolutely necessary. Perfect cleanliness during the treatment is an important element in the success of the operation. The parts should be thoroughly cleansed by a hot vaginal douche immediately before beginning the treatment; the sound to be used must lie in a two per cent. carbolic solution—hot. The cosmoline used must be strictly clean, from a box used for no other purpose, and the sound so carried into the uterus as not to touch the vaginal walls with that part which is to enter the cavity of the uterus. A tampon, saturated with two parts glycerine to one part calendula, inserted after each treatment, will have a soothing and healing effect. To rule dilatation out of gynecological treatment, would be to condemn many women to hopeless invalidism.

From the favorable termination of severe cases of retroflexion through this treatment, which have come under our observation, where the patients had been treated for several years by good physicians, we feel sure that in many cases this is the key which unlocks the secret of cure. In cases where we have a spasmodic condition of the internal os, dilatation will often act like magic in relieving symptoms, if it does not alone produce permanent cure. A word in regard to the knee-elbow position in making examination for diagnosis. Young physicians often find it difficult, and sometimes impossible to bring the cervix into the field of the speculum with the patient in the ordinary position. Where trouble is experienced in this attempt to insert the speculum, by placing the patient in the knee-elbow position the cervix will be readily found, and if the sound is to be

used it will pass much easier in this position. Bi-manual examination should, however, always be made previously with the patient on the back or in Sim's position, as otherwise the physician might be deceived as to the degree of the flexion or version.

Obstinate cases of flexions and versions will often respond, in a short time to a treatment of repositing to the extreme opposite position; that is to treat an ante-version by putting the uterus in retroversion and vice versa. In flexions the flexion must first be overcome for the time being, by bi-manual manipulations and dilatation and the uterus then placed in the correspondingly opposite version with the repositor.

There is, however, in our opinion, one *sine qua non* in all forms of mechanical treatments for uterine displacements; there must be absolutely no downward pressure in the uterus from without. In the upright position there is naturally some pressure from the other pelvic organs, but nature has provided for this by making the ligaments of the uterine body elastic and flexible. But nature has made provisions only for the amount of pressure which she has placed there and has made no allowance for any bungling interference from without. Constriction and weight at the waist line, be it ever so slight, is quite sufficient to nullify the most scientific treatment.

It is not uncommon to hear of doctors saying that a loose corset does no harm. There is no such article as a loose corset. If a corset is tight enough to mould to the figure, it is not loose. Any form of clothing which prevents the fullest expansion of the chest and the freest movements of the muscles, is tight clothing and capable of infinite harm. If physicians would insist upon this loose dressing as an absolutely indispensable part of the treatment, they would find many a so-called incurable case, yield to mild mechanical measures and would moreover have the satisfaction of seeing health and spirits return to many a patient given over to a hopeless invalidism.

Uterine Displacements. Their Causes and Treatment.

BY MOSES T. RUNNELS, M. D., KANSAS CITY, MO. READ BEFORE THE SOUTHERN HOMEOPATHIC MEDICAL ASSOCIATION, AT MEMPHIS, NOVEMBER, 1889.

Pelvic inflammations bear a direct relation to uterine displacements. Versions and flexions of the uterus, originate outside of the uterus, as a general thing. The broad ligament may become inflamed giving rise to a retroverted or prolapsed uterus. The utero-sacral ligaments may be inflamed and cause an anteversion providing a prolapse has not existed previously when the version would become a backward one. In this case the peritoneal surfaces in Douglas' cul-de-sac would become inflamed and long continued inflammation would cause adhesions to form and fix the uterus in this position. A local peritonitis may cause adhesion which exert a traction on one part or another, and thus affect tissues which support the uterus. Congestions take place in the pelvis and the fascia and connective tissues cannot give support to the engorged blood vessels. Sometimes a retroversion is a congenital condition and so long as the woman remains free from pelvic inflammation she will not suffer from the mal-position. A pelvic peritonitis causes an obstructed circulation which may result in a flexure of the body of the uterus. Flexure and dysmenorrhoea may exist together and both be due to the same cause. Dysmenorrhoea is the direct result of impaired nutrition and weakened nerve centres. Anaemia is the cause of dysmenorrhoea and not the uterus or its appendages. A pelvic inflammation is the frequent cause of irregular loss of blood from the uterine canal, and sometimes an entire absence of the menstrual flow. The injudicious use of ergot has setup frequently peritonitis in the pelvis which resulted in complicated

adhesions. A woman who has at one time had a local peritonitis with subsequent formation of adhesions will be liable to have some displacement of the uterus at some time in her life. On exposure to cold she will complain of pain in the region of the former pelvic inflammation. The surgeon must have a keen appreciation of the different shades of pelvic inflammation and a knowledge of their relative importance. He may have to deal with a phlebitis, a cellulitis, a lymphangitis or a peritonitis, or one or more of these affections may exist together and thus cause a displacement of the uterus. Cellulitis is the most common form of inflammation met with in the female pelvis. A cellulitis cannot exist to any extent without involving more or less of the peritoneum, and when a pelvic inflammation has been of long standing it takes on the characteristics of an old peritonitis. Whenever a displacement of the uterus is found, a pelvic inflammation should be searched for.

Retroflexion of the Uterus; with Local Peritonitis.

CASE I. MRS. C—, AET 28.

Married when nineteen years old, soon became pregnant and about the third month lost the product of conception. Became pregnant again and twenty-one months after marriage gave birth to a healthy child; was but one hour in labor; took cold the fourth day after labor and had considerable inflammation of the uterus and bowels. Got up the fifteenth day and did not go to bed again. Went up and down stairs—sometimes a dozen times per day. Her husband died when the child was a few weeks old. She did not feel the least disturbance or weakness anywhere till two years afterwards when she was married again. However she came unwell irregularly about every three weeks from the time the child was thir-

teen months old, Nov. 23, 1884,—three months after second marriage, took cold again at the monthly period. She felt a chill strike through the bowels in the region of the left ovary. Local peritonitis and metritis followed, and she was confined to the bed seven weeks. She was under Allopathic treatment. Aug. 10, 1885, the case came under my professional care. She complained of considerable soreness in the hypogastric and left inguinal regions, could not wald any distance without increasing the pain, was very susceptible to cold which always affected her in these regions, was constipated, nervous and unable to sustain mental or physical exercise very long at a time. On examination I found the uterus retroflexed and very sensitive to the slightest touch of the finger. There was considerable peri-uterine inflammation, with areolar hyperplasia of the cervix, and the left ovary was somewhat enlarged and every time the finger presses upon it ever so slightly she complained of great pain. Thoughtlessly I passed the sound to measure the depth of the uterus and found it to be $3\frac{3}{4}$ inches. Her temperature within twenty-four hours went up to 103° and she had tympanites and great soreness of the lower abdomen. I was sure that the irritation caused by the passing of the sound set up the inflammation. It was ten days before my patient could be out of bed, and I did not pass the sound or anything else into her uterus again right away. By the daily use of hot douches I considerably reduced the inflammation and in about three weeks I commenced local treatment. This consisted of placing in the vagina well up into Douglas' cul-de-sac a tampon of cotton wool saturated with the following:

R. Glycerine, 14 parts.
Boro-glyceide, 1 part.

M.

Without producing much pain I endeavored to make the tampon act as a

support to the retroflexed uterus, and at the same time establish a depleting process depending upon the glycerine according to Emmet to provoke, "in consequence of its avidity for moisture a profuse watery discharge which empties the capillaries without apparently taking more than the serum, or robbing the blood of other constituents, to the detriment of the patients strength. It has the same power as hot water although in a less degree of exciting capillary contraction, for any surface which has been long in contact with the glycerine will be found shrivelled and bleached in appearance." At first the tampon was allowed to remain in the vagina about forty-eight hours. It was then removed by the patient, a string having been attached to it so that she could easily do this. She was then instructed to take a vaginal douche of hot water at least half a gallon, in a recumbent posture. About six hours after this douche I would again insert a cotton-wool tampon prepared in the same way as previously stated, and follow the same method repeatedly till all inflammation and sensitiveness from the uterus and surrounding parts had subsided. The treatment would then be omitted perhaps for a week or two weeks and commenced again when the returning inflammation, displacement and sensitiveness from the uterus and surrounding parts seemed to require further treatment. During the monthly flow the local treatment was omitted of course. Such remedies as belladonna, nux vomica, aconite, lillium tigrinum, pulsatilla, ignatia, and other remedies were administered from time to time according to indications. Her weight increased very soon after the commencement of the treatment from 120 lbs. to 135 lbs., and her general health was so good that her friends could not understand why she should continue treatment. However

she did not immediately become pregnant, and the husband was very desirous that this should take place.

In March, 1886, the patient went to Chicago to consult Dr. Wm. H. Byford. He confirmed my diagnosis, approved my treatment and advised her to return to me for further treatment. The treatment was continued off and on till Feb. 1888. Pregnancy had not yet taken place although the uterus had resumed its proper position and nearly all sensitiveness had disappeared from the uterus and the surrounding parts. The monthly periods were normal so far as I could ascertain. I examined the uterine canal again very carefully and found a stricture at the point of the former flexure, due doubtless to the long continued inflammation at that point. With the assistance of Dr. Wm. D. Foster, I placed the patient under chloroform and dilated the cervical canal to $1\frac{1}{4}$ inches. After this operation she was entirely cured as far as I could judge. The following November she became pregnant and everything went well till the fifth month, when she took a little too much exercise and came near miscarrying. Confinement in bed for a week and the administration of the Homeopathic remedy removed the danger and at the completion of nine months she gave birth to a healthy boy. I am satisfied that my success in the above case depended chiefly upon the proper use of the cotton-wool tampon medicated, the thorough study of the characteristic symptoms and the administration of the similimum. No pessary however well fitted would have accomplished the desired result. I have witnessed more harm from pessaries of all kinds than good and in my practice I have almost wholly discontinued their use. No matter what the displacement of the uterus is, I can do more with the skillful use of cotton wool saturated with glycerine and boro-

glyceride than I can do with any pessary soft or hard. The constitutional symptoms of the case must be thoroughly understood and the Homeopathic remedy must be selected with the greatest care in order to obtain the greatest improvement.

Retroflexion of the Uterus with Local Peritonitis.

CASE 2. MRS.—, AET. 28.

Married in 1882. Was not well as a girl. Menses were regular but had sick headache always before or just after the monthly flow. If the headache did not come at the beginning of the flow, it came with redoubled force at the close. The flow was always excessive. The headaches were always attended by vomiting and would continue from twelve to twenty-four hours. The nausea was so severe that she could not eat anything, or drink but little water, or be out of bed. Weighed usually 110 to 115 pounds. In 1882 just before marriage she was thrown from a horse and thought at the time that her uterus had been misplaced. She applied to me for relief March 15, 1887. On examination found a badly retroflexed uterus with areolar hyperplasia. She said that she had been pregnant once soon after marriage but had unfortunately lost the product of conception, six weeks after its commencement at the time of monthly headache. Uterus and vagina both very sensitive to touch. Commenced treatment by use of hot vaginal douches given in recumbent posture once per day. Gave *nux vomica* 3x internally. In a week made use of the cotton wool tampon saturated with glycerine and boro-glyceride. In using it the effort was made to support the retroflexed uterus as much as possible. The tampon was left in the vagina from two to four days owing to the comfort of the patient. She was instructed to remove the tampon at any time by the string attached to it, provid-

ing she should suffer much pain from it. She had but one headache after beginning the treatment. In September, 1887, six months after commencing treatment, she became pregnant and in nine months gave birth to a healthy boy.

Pelvic Cellulitis with Retroflexion of the Uterus.

CASE 3. MRS. M——, AET. 32.

Married in February, 1887, Having graduated in the Normal School of Indianapolis she taught school for seven years. She had studied too hard in school, and always felt "worn out." In 1882 went to Dakota and pre-empted a quarter section of land and farmed it for six months. While there recieved a displacement of the uterus backwards by being thrown from a horse. On her return to Indianapolis she felt obliged to consult her physician on account of pain in her back and limbs, headache and great pain in the lower abdomen at the time of the menses. He examined the uterus and found it retroflexed. He placed a hard rubber pessary in the vagina and advised the use of hot vaginal douches. She wore the hard rubber pessary almost constantly till 1887. The doctor advised her to stop teaching and make a business of getting well. This she was unable to do because she was earning her own living. In 1887 came to Kansas City and was treated for another year by an Allopathic physician, who dilated the cervical canal and continued the use of the hard rubber pessary for retroflexion. In February, 1888, was taken very sick with what her doctor called "Malarial Fever," and was confined to her bed for four weeks. When able to be out of bed, went out of doors too soon and took a severe cold which put her in bed again. At this time Mar. 7, 1888, I was called to see her. She had pelvic cellulitis and metritis. The tem-

perature was 104°. She was in great pain in almost every part of her body. On examining the vagina I found the hard rubber pessary which she had worn so long and which her last Allopathic physician refused to remove. On removing the instrument I found a terrible state of affairs. Both the vagina and uterus were highly inflamed and extremely sensitive to the least touch of the finger; I found tympanites of the abdomen, nausea and vomiting, very restless, sleepless and fully persuaded that she was going to die. Her weight formerly about 115 lbs. had decreased to 95 lbs. For a week I hardly knew whether she was to live or die. Her temperature ran from 102° to 105°. Hot water was used freely in the vagina and hot dry flannels were kept on the abdomen. Belladonna 3x and aconitum nap. 3x in the beginning served me well. When the sensitiveness and inflammation of the uterus and the vagina had subsided sufficiently I commenced placing in the vagina small tampons saturated with glycerine and boryglyceride, the tampon was removed every twenty-four hours and replaced by a new one. The reaction came very slowly and a month was spent in bed. Aconitum nap, belladonna, chelidonium maj, ignatia and nux vomica were the remedies mostly relied upon. Her appetite began to improve and she gained in flesh rapidly weighing in two months 120 lbs.* As soon as the inflammation and tenderness of the uterus and vagina had abated sufficiently the tampon was placed well up into Douglas' cul-de-sac so as to support the uterus and there it was left for a longer time, two to three days. Although the patient had become stronger than she had been for years and was enabled to do her own house work, she did not become

DEC. 2, 1889.

The case—Mrs. M——, in my paper, reports that she now weighs 130 lbs.

pregnant. The uterus had not yet sufficiently recovered from the damages received from the long use of the hard rubber pessary to stay in its normal position long at a time without support nor has she yet conceived. That she is alive and in better health than for years is in her case a good deal to say. If treatment is faithfully continued I expect her uterus will stay in its normal position without support, and that she will become pregnant. In this case we have an example of what damage a pessary can do. In no case should a pessary remain in the vagina longer than ten days without examination by the surgeon.

Prolapse of the Uterus and Vagina.

CASE 4. MRS. T—, LEAVENWORTH, KANS., AET. 47.

Married in her seventeenth year. Had three children, the last one twenty-one years ago. The cervix and perineum were both lacerated at the birth of the last child. The general health was not good for fifteen years at which time the uterus and vagina had prolapsed so much that the patient was rendered miserable. She complained of pain in the back. Menses became irregular, the intervals between the periods were from three and a half to five weeks. She was constipated a good deal of the time. Formerly her weight was as high as 130 pounds, decreased to 105 pounds. Had sick headache and neuralgia considerably. On examination found the uterus and vagina greatly prolapsed. The prolapse of the uterus was in the 3d. degree, the cervix protruding from the vulva in a state of chronic hypertrophy. The cervix was lacerated bilaterally. The depth of the uterus was $3\frac{3}{4}$ inches and was somewhat retroverted. The perineum was ruptured to the sphincter ani. She was taken to the Homeopathic Hospital of Kansas City, put to bed, the uterus was

replaced and held in position as much as possible by a cotton wool tampon saturated with glycerine and boro-glyceride as previously stated. Sept. 15, 1889, after the uterus was "shrivelled and bleached" sufficiently, the laceration was repaired by the assistance of Drs. Wm. D. Foster, C. C. Olmstead, P. H. Dassler, and A. M. Wilson. With the scalpel a very large V shaped piece was taken out on each side and the central portion of the cervix was cut away anteriorly and posteriorly to correspond, thereby very much reducing the size. In inserting the sutures care was taken to leave an exit sufficient for the uterine canal. Thorough union was the result of the operation and she suffered so little inconvenience from it that I decided to make the second operation for the restoration of the perineum without delay. Accordingly on Oct. 5, 1889, with the assistance of Drs. Foster and Olmstead and the trained nurse Miss Carrie B. Ellsworth, the perineum was operated upon and enough of the spacious vaginal surface was denuded so that the vaginal outlet would be normal when the sutures were inserted and brought together. In ten days the sutures were removed and the union was perfect. The uterus was in position and the patient was doing well. At the end of three weeks the patient returned to her home in Leavenworth, cured of prolapse of the uterus and vagina.

In the surgical treatment of prolapsus uteri I have found that Kolporrhaphy is a useless operation, because it is not of as great service as the old operations upon the cervix uteri and the pelvic floor.

It is estimated that about 50 per cent. of the cases of laceration of the cervix require surgical treatment and of this number the majority have a displacement of the uterus usually backwards or laterally. In consequence of extreme laceration of the cervix uteri, cellulitis is quite apt to result, and bands of adhesions are formed binding and forcing the uterus into a backward or lateral displacement. These forms of displacement are very intractable and cannot be relieved except by local and medical treatment to be followed by proper surgical treatment.

CONDENSED DISCUSSIONS UPON THE FORE-GOING PAPERS.

Prof. E. H. Pratt, of Chicago. Emmet of New York has induced many medical men to follow his teachings which he has practiced for almost a lifetime and he has now reached the conclusion that his teachings are not right. Now comes Dr. Lucy Waite and recommends that which has made Emmet a failure, in a better way, however. The uterus has its own ways. The best way to keep it in a healthy condition is for the woman to have a baby every two years. I believe that the key of uterine displacements is the internal os. It is the centre of commerce of that locality. Dr. Runnels' mistake in the second case was in using a small sound. It is dangerous to enter any cavity with a *small* instrument, because small instruments set up a discharge and do not give an outlet for the same. When a uterus topples it is weak, it is tired and the endometrium is the same. You should do thorough work in the cases, and thoroughly dilate the internal os, that no discharge can accumulate. Having done good work you must allow some time to pass for the results to follow. Simple local applications will assist in performing a cure by the soothing effect which they have on the surrounding nerves. It is in this same manner that external applications can soothe an internal trouble.

Dr. Jno. H. Henry, Montgomery, Ala. I endorse what Dr. Pratt has said. I never saw Dr. Sims cure a case of recto-vaginal or verscio-vaginal fistula, and do not believe he ever cured one in his life.

Dr. C. E. Walton, Cincinnati, Ohio. I have never seen J. Marion Sims cure verscio-vaginal fistula. I have seen others do it, however. I have seen much harm from uterine tinkering. In regard to pessaries it would seem that Dr. Hewitt was the only person capable of putting in a pessary. I want to say one word about

retroflexion. Dr. Pratt says it is the internal os that is at fault. I think we would better look to the ovaries and tubes. The diseases, perimetritis and periionitis, have much to do with the condition. We have no way of distinguishing between the two. These diseases are the result of gonorrhoeal infection or puerulent inflammation of the tubes or ovaries. Many of the medicines will not reach these cases. When you have the rigors and fever and pains the thing to do is to go in and loosen up the membranes which have become united by the pelvic inflammation and thereby give the patient a chance to live.

Dr. W. E. Green, Little Rock, Ark. I cannot agree with those who advocate the universal use of pessaries, nor with their entire dispensation. It is an instrument that cannot be dispensed with; there are certainly cases that cannot be benefitted with pessaries. They trouble the patient a good deal and are a constant source of pain. There are cases in which inflammatory conditions can be excluded. The ordinary treatment otherwise than a support is no relief to them. Many of these patients will not consent to an operation to correct these lax tissues. There are no class of pessaries that can be adapted to all cases. I have one-half bushel in my office, and sometimes after going through the whole lot do not find the pessary I want. It may be any variety of pessary that I desire to use, but it must be adapted to the shape of the canal, and should be the smallest instrument that will give the support. The trouble with pessaries is that they are usually too large. The instrument must be small, so that there is no unnecessary pressure thrown on any part. Some of these pessaries will relieve these cases when nothing else will. They are particularly for the sagging of the tissues.

Dr. E. H. Pratt, Chicago, Ills. I am a tenderfoot. When I go in I do a thorough piece of work. There is one point to which I wish to call the attention of Dr. Walton, which he will recognize, and that is that the inflammation of an organ starts at the mouth. It is the key of the situation. I make this explanation: the tube of the ovary is the fallopian tube, yet you will never have a case of ovaritis, salpingitis where it does not start at the os of the uterus. You will never have a cervical endometritis where you have not an inflammation of the external os.

Dr. Sarah J. Millsop, Bowling Green, Ky. Dr. Pratt, do you ever have any bad results?

Dr. E. H. Pratt, of Chicago, Ills. Very seldom. When I do, it usually can be traced to carelessness in carrying out my instructions, as for instance not keeping the patient sufficiently clean.

Dr. Moses T. Runnels, Kansas City, Mo. I would like to ask Dr. Pratt whether he would dilate the os uteri if a woman were suffering with cellulitis, and had a temperature of 103°.

Dr. E. H. Pratt, Chicago, Ills. No sir, never.

Dr. Moses T. Runnels, Kansas City, Mo. I believe in the official philosophy of Dr. Pratt. I agree with him in regard to the dilatation of the internal os in some cases. I never make now an explanatory examination with the uterine sound. I place these cases on record, as my actual experience. Of course I am a student and if there is anything better than the method I have adopted, I am ready to be convinced. It is by these discussions that you get at the most practical things. I am eager to hear all the ideas Dr. Pratt has to present. I have adopted many of them in my practice. I would like to hear some remarks on prolapsus uteri.

Dr. E. H. Pratt: Repair the damages

in the first place, and you will do very much toward curing prolapsus uteri.

Dr. C. E. Fisher: I think Dr. Green is in error in using pessaries. I don't think there is a pessary made to correct a uterine displacement. I do not believe the mechanical application of a pessary is justifiable in gynecology. I differ with Dr. Pratt. I think there are a fair share of cases that are due to spurious peritonitis. I have seen cases where traumatic inflammations have followed dilatations. I know one case where I dilated gradually, and I had a most violent case of endometritis. I used the graduated steel sounds. It was a case where I desired to relieve a retroflexion which was the cause of a violent dysmenorrhoea. The channel was very narrow below the internal os. Dr. Pratt may get good results, but I think there is some danger. Dr. W. G. Wiley, New York abandoned the graduated sounds because they set up traumatic peritonitis.

In regard to the case of Dr. Runnels, I believe it to be the proper thing to do to dilate the os when the temperature is high. I did this in a case of mine, when the temperature of the patient was 105°, and cured my patient. I think we have sufficient reason for doing this when the temperature of the patient is high and the danger of sepsis threatening. Antiseptic solutions should of course be used afterwards.

Dr. J. W. Buddeke.: I would like to ask Dr. Fisher, was the dysmenorrhoea caused by the flexion, or the flexion by the dysmenorrhoea?

Dr. E. C. Fisher: The dysmenorrhoea was caused by the flexion. The flexion was supposed to be due to dancing. I commenced with a No. 7 sound and carried it up several sizes.

Dr. E. A. Meadow, Blocton, Ala.: I have a case I would like to report. She received a severe strain from lifting a tub of water, and caused a retroversion, and

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FORMULA—Each fluid drachm of "Lithiated Hydrangea" represents thirty grains of FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength, and hence can be depended upon in clinical practice.

DOSE—One or two teaspoonfuls four times a day (preferably between meals).

Urinary Calculus, Gout, Rheumatism, Bright's Disease, Diabetes, Cystitis, Hematuria Albuminuria, and Vesical Irritations generally.

We have much valuable literature upon { GENERAL ANTISEPTIC TREATMENT, LITHEMIA, DIABETES, CYSTITIS, ETC. } To forward to Physicians upon request.

LAMBERT PHARMACAL CO., ST. LOUIS, MO.

CEREBRAL EXHAUSTION.

HORSFORD'S ACID PHOSPHATE.

It has been shown that the phosphates are found in excess in the urine in cases where the nerve centres (the brain and spinal cord) have been overworked, or subjected to undue labor, and the opinion is confirmed that there is a received relation between an excess of phosphates in the urine and intellectual exercise.

This preparation supplies the phosphates and phosphoric acid, is readily assimilated, pleasant to the taste, and aids digestion.

DR. S. A. HARVEY, Cheboygan, Mich., says: "I have used it with marked benefit, in several cases of cerebral irritation."

Send for descriptive circular. Physicians who wish to test it will be furnished a bottle on application, without expense, except express charges.

Prepared under the direction of Prof. E. N. HORSFORD, by the

Rumford Chemical Works, Providence, R. I.

CAUTION:—Be sure the word "Horsford's" is PRINTED on the label. All others are spurious. Never sold in bulk.

BEWARE OF SUBSTITUTES AND IMITATIONS.

since then has been troubled with menorrhagia. I have made an examination and passed a No. 14 sound. She however is still troubled. I would like to know what the treatment should be in this case.

Dr. E. C. Fisher : I should dilate the os and use a dull curette or moderately sharp curette to get rid of the villous growths. I think the general application of the orificial philosophy is one of the best in these cases. I am a little careful about rapid dilatation. In regard to pessaries, I do not believe that the angle of the pessary can be applied to the body of the uterus.

Dr. C. E. Walton, of Cincinnati, Ohio : The pessary does not hold up the fundus. It pulls up the culde sac and the uterus goes up in front—just what you want. I prefer the Gordell's bivalve dilator to the graduated dilators. You only have one instrument to keep clean.

Dr. Moses T. Runnels : I would like to know Dr. Fisher's local treatment.

Dr. C. E. Fisher : A weak solution of permanganate of potassium. A woman that wears a pessary will no more be cured than a man wearing a truss for a hernia, or putting his arm in a sling. You want to support the uterus till it has had time to heal and then leave it alone. I removed a pessary from one case which the woman had worn for thirteen years.

Dr. E. H. Pratt : Splints and pessaries should of course be worn properly. The pessary should be so comfortable that the patient should not be conscious of its presence. Pessaries are of course temporary supports. You must not ignore the other organs. Examine the rectum. If rectal irritation is present and not removed the work you do harms as well as does good. The uterus topples because it is weak. I use electricity. Dilatation of the vagina tones up the vagina. The walls of the vagina are a support when the uterus is at a certain angle.

Dr. Wells LeFevre, Hot Spring : I believe with Dr. Thos. Streetor, that the vagina is not a tubular organ, but a slit. I have avoided the use of pessaries, knowing that they are hard to fit. Frequently the dilatation of the vagina will give excellent results. Wool tampons moistened with calendula, glycerine, will act as supports. I believe that the theory of orificial surgery solves the problem of gynecology as completely as anything yet discovered.

Dr. S. M. Angell, New Orleans : I approve of everything Dr. Fisher has said.

Dr. C. E. Fisher : I admire Dr. Pratt, because he has cut himself loose from the general opinions of the physicians. The most advanced physicians condemn the use of pessaries.

Dr. W. E. Green : I abandoned uterine dilatation because I had much trouble with the uterine sounds. I never had the bad results with Goodell's sound. I never yet had any trouble when dilated as directed by Dr. Pratt. I have also removed rectal trouble whenever present. We all do what Dr. Fisher does, and only use pessaries where absolutely necessary.

Dr. J. W. Buddeke, Memphis : I want to ask Dr. Fisher the result of the dilatation in the case with a temperature of 105 degrees.

Dr. C. E. Fisher : The temperature went down rapidly after the dilatation, and the patient made a nice recovery.

Dr. Sarah J. Millsop : Dr. Paul F. Mundé has had bad results from dilatation. I use pessaries occasionally but pay particular attention to homeopathic remedies and PROPER DRESS.

Discussion closed.

Patrons of the JOURNAL will observe that we devote more space than usual to "Practice" in this issue, but we trust it will prove interesting reading to the profession, especially to the delegates who attended the meeting at Memphis.

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